SUPPLEMENT

TO THE

BRITISH MEDICAL JOURNAL.

LONDON: SATURDAY, MAY 21ST, 1910.

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SPECIAL NOTICE TO MEMBERS.

Every member is requested to preserve this "Supplement," which contains matters specially referred to Divisions, until the subjects have been discussed by the Division to which he belongs. BY ORDER.

MATTERS REFERRED TO DIVISIONS.

British Medical Association.

Annual Representative Meeting, 1910.

THE Annual Representative Meeting will be held in the Court of Common Council Chamber, Guildhall, London, on Friday, July 22nd, 1910, and following days as may be necessary.

On the Friday the Meeting will immediately follow the Annual General Meeting to be held at 10 a.m.

PROVISIONAL AGENDA.

ORDER OF BUSINESS.

A. Reception of Return of Representatives Elected.

1. **Motion:** That the Return of election of Representatives of Divisions for the year 1910–11 be received, approved, and entered on the Minutes.

2. **Motion:** That the Notices (if any) of appointment of substitutes for Representatives under Article XXX and By-law 19 be received, approved, and entered on the Minutes.

B. Standing Orders.

(For Standing Orders as adopted at Belfast, see Appendix A, page 242.)

3. **Motion:** That the Standing Orders, submitted by the Chairman, be adopted as Standing Orders of the Meeting.

The Chairman will submit the Standing Orders adopted at Belfast (see page 242), with the addition of the following new Standing Orders proposed by the Council, and subject to such other additions and such alterations as may hereafter be notified to the Representatives:

Section III of Standing Orders ("Procedure"):

Election of Members of Council by grouped Representatives. (Proposed new Standing Orders.)

1. That the election take place at the time of the Annual Representative Meeting.

2. That a nomination for a Member of Council to be elected by any group of Representatives be required to be made by a Division or a Representative of a Division included in the group.

3. That nominations be required to be on the form appended. (See Appendix B, page 245.)

4. That nominations be received up to the end of the first hour of the third day's session of the Annual Representative Meeting.

5. That there be issued to each Representative or Deputy Representative of a Constituency in the United Kingdom in attendance at the Meeting a voting paper containing the names of all candidates duly nominated for election as Members of Council by the group to which such Representative belongs.

6. That the voting paper be in the form appended. (See Appendix C, page 246.)

7. That the voting papers be returned to the Medical Secretary within one hour from the commencement of the fourth day's Session of the Annual Representative Meeting.

8. That in the event of equality of votes the election be determined by the aggregate number of Members in the Constituencies represented by the voters for each candidate, as in the case of a card vote.

9. That the details of the voting be placed before and verified by the Chairman before being declared.

C. Annual Report of Council.

(For Annual Report of Council, 1909-10, see page 248.)

4. **Motion**: That the Annual Report of the Council for the year 1909-10, and Estimate of Income and Expenditure for the year 1910, be received.

5. **Motion** (By the Chairman): That all Motions by Divisions or Branches which relate to matters dealt with in the Annual Report of Council be considered as amendments or riders to the Recommendations, if any, to which they are relevant, or to the Motion: "That the remainder of the Report under the heading . . . be approved."

6. **Motion**: That paragraphs 1 to 4 of the Annual Report of the Council be approved (page 248).

7. **Motion**: That the Financial Statement and Balance Sheet for the year 1909 be approved (pages 249–256).

8. **Motion**: That paragraph 7 (Estimate of Receipts and Expenditure for 1910) be approved (page 256).

9. **Motion**: That paragraph 8 (Apportionment of Members' Subscriptions) be approved (page 256).

10. **Motion**: That paragraph 9 (Issue of SUPPLEMENT to Non-members) be approved (page 256).

11. **Motion**: That paragraphs 10 to 13 (Control of Advertisements in JOURNAL) be approved (page 256).

12. **Motion**: That paragraph 14 (Duties of Secretariat) be approved (page 256).

13. **Motion**: That paragraphs 15 to 20 (*re* Accident Policy in connexion with BRITISH MEDICAL JOURNAL) be approved (pages 256–257).

14. **Motion**: That paragraph 22 (Medical Benevolence) be approved (page 257).

15. **Motion**: That paragraphs 23 to 27 (the BRITISH MEDICAL JOURNAL) be approved (pages 257–258).

Articles in "British Medical Journal."

16. **Rider** by CHELSEA DIVISION:

That this Meeting requests the Council to cause to be inserted on the leader page of every issue of the JOURNAL a disclaimer, stating that the views expressed in the articles therein, represent the opinions of the writer only, and not necessarily those of the general body of the British Medical Association; and that all articles be signed.

(SUPPLEMENT, April 23rd.)

Articles and Letters forwarded by Members to "British Medical Journal."

17. **Rider** by ROCHDALE DIVISION:

That the JOURNAL of the British Medical Association is, among other things, the medium for expressing the views of its Members, and if any article or letter be excluded, the Editor should reply within a reasonable time, stating the reason for its exclusion. If the Member be not satisfied with the explanation, the question shall be referred to the Journal Committee.

(SUPPLEMENT, April 23rd.)

ORGANIZATION.

Capitation Grants.

18. **Motion**: That the following Recommendation of Council be adopted (paragraph 38 of Report, page 259).

That, concerning the following Motion, submitted by a Division to the Annual Representative Meeting, 1909, and referred by that Meeting (Minute 195) to the Council for consideration, namely:

194. That in view of the facts (1) that the policy of the Association is to consider the Division as the primary unit, each Division being free to govern itself in such manner as it shall think fit; (2) that the decision as to what additional subjects shall be forwarded to the Divisions for consideration rests with the Representative Body and the Central Council, and not the Branch Councils, this Representative Body considers that it is illogical any longer to place in the hands of Branch Councils the funds for distribution to the Divisions, while at the same time depriving them of any control over the objects for which the money is used, and instructs the Central Council to so amend the By-laws as to place the distribution in the hands of the Central Council, which can make Capitation Grants to all Divisions and Branch Councils as may be required,

it is inadvisable to adopt the policy referred for the consideration of the Council.

Election of Representatives.

19. **Motion**: That the following Recommendation of Council be adopted (paragraph 41 of Report, page 260):

That the Meeting approve of the principle that each Constituency elect at least one Representative and (in the United Kingdom) an additional Representative for each 100 members after the first 50, and that on a card vote the voting power of a Constituency which has more than one Representative be equally divided among all the Representatives of that Constituency.

Formation of British Medical Students' Union.

20. **Motion**: That the following Recommendation of Council be adopted (paragraph 49 of Report, page 260):

That the instruction contained in Minute 197 of the Annual Representative Meeting, 1909, relative to the formation of a British Medical Students' Union, be continued.

Appointment of President of Association.

21. **Rider** by ROCHDALE DIVISION:

That, with regard to the appointment of the President of the British Medical Association, the Representative Meeting resolves that the Council should consider the question of the abolition of the custom of choosing the President from the place in which the Annual Meeting is held, and the fact that eminence in the scientific side of the profession should not outweigh years of strenuous work on behalf of the Association. They should also bear in mind in appointing to this—the highest honour—that of the 22,000 Members by far the greatest majority are general practitioners.

(SUPPLEMENT, April 23rd.)

22. **Motion**: That the remainder of the Annual Report of Council under heading "Organization" (paragraphs 28 to 54, pages 258–260) be approved.

Membership.

23. **Rider** by ROCHDALE DIVISION:

That there be two grades of subscriptions—one as at present, to include membership of Association and JOURNAL; and one, say at 10s. 6d. annually, to include membership and the SUPPLEMENT of the JOURNAL only, and that the Council be instructed to take the necessary steps for the requisite alterations of the Regulations of the Association.

(SUPPLEMENT, April 23rd.)

24. **Rider** by WIGAN DIVISION:

That in order to bring as large a number of the profession as possible into close touch with Medical Politics and Sociology there shall be two kinds of membership of the Association:

(*a*) Full membership at present rate with the existing privileges.

(*b*) Part membership at, say, ten shillings a year, which should entitle such Member to attend Divisional and general Branch meetings and to receive the SUPPLEMENT weekly, but not the JOURNAL itself.

(SUPPLEMENT, April 23rd.)

25. **Rider** by DUNDEE BRANCH:

That no Member shall be able effectively to resign his membership while any discussion as to the conditions of professional employment is in progress between the Association and any organized body, public or other, affecting the area of his Branch or Division, and that it be an instruction to Council to prepare the necessary amendments of the Articles and By-laws.

(SUPPLEMENT, April 23rd.)

Grouping.

26. **Motion** (from the Chair): That the Grouping of Divisions and Branches in the United Kingdom for the election of Members of Council for the year 1911-12 be the same as for the year 1910-11.

27. **Motion** (from the Chair): That the Grouping of Divisions and Branches not in the United Kingdom for the election of Members of Council for the year 1911-12 be the same as for the year 1910-11.

28. **Rider** (arising out of paragraph 43 of Report, "Grouping of Branches," page 260) by BOMBAY BRANCH:

That the present grouping of Indian Branches with Burma, Hong Kong, China, and Ceylon Branches will cause a great delay in any communication likely to be carried on between the grouped Branches. That it would be better to give one Member to the following Branches—namely, Bombay, Punjab, South Indian and Madras, and Assam; and another to the other Branches—namely, Burma, Colombo Ceylon, and Hong Kong and China.

(SUPPLEMENT, April 23rd.)

(For present grouping of Branches not in United Kingdom see Appendix D, page 246.)

29. **Rider** (arising out of paragraph 43 of Report, "Grouping of Branches," page 260) by CAPE OF GOOD HOPE—WESTERN PROVINCE BRANCH:

That the South African Branches, including over 500 members, be represented by one member of Council.

(SUPPLEMENT, April 23rd.)

Elections.

30. **Rider** by DUNDEE BRANCH:

That it be an instruction to the Council to take the necessary steps for the adjustment of the Regulations of the Association so as to provide as far as possible for the conduct of all elections in the Association by the method of the transferable vote.

(SUPPLEMENT, April 23rd.)

Matters Referred to Divisions.

31. **Rider** (arising out of Report of Council under heading "Organization,") by WEST SUFFOLK DIVISION:

That in the opinion of the Representative Meeting it is desirable, as a means of awakening fresh interest in the work of the Association, that when matters are referred to Divisions in the SUPPLEMENT of the JOURNAL, a blank leaf, naming the subjects, should be inserted in the same SUPPLEMENT, and attention called to it in the "Special Notice to Members."* Upon this leaf any Member who is unable to attend the meeting of his Division, when these subjects are placed on the agenda, may write his opinion and send it to the Secretary of his Division to be considered at the meeting.

*[EXISTING FORM OF SPECIAL NOTICE TO MEMBERS.

Every member is requested to preserve this SUPPLEMENT, which contains matters specially referred to Divisions, until the subjects have been discussed by the Division to which he belongs.

Words Proposed by West Suffolk Division to be Added.

"If unable to attend the Division meeting, he should write his opinion on the blank leaf attached, and send it to the Secretary of his Division."]

(SUPPLEMENT, April 23rd.)

SCIENCE.

32. **Motion**: That the following Recommendation of Council be adopted (paragraph 55 of Report, page 269):

That, having regard to the considerable facilities for research which at present exist in various parts of the country, and the heavy financial requirements of such an undertaking, it is inadvisable for the British Medical Association to attempt to establish a Central Research Laboratory.

33. **Motion**: That the remainder of the Report under heading "Science" (paragraphs 55 to 61, pages 269–270) be approved.

MEDICAL ETHICS.

34. **Motion**: That the following Recommendation of Council be adopted (paragraph 63, page 270):

That having regard to the replies received from the Divisions, the Representative Meeting does not deem it advisable to proceed at present to the drafting of any regulations to govern a special class of consultants.

35. **Motion**: That the remainder of the Report under the heading "Medical Ethics" (paragraphs 62 to 72, pages 270–271) be approved.

Ethics of Consultation.

36. **Rider** (in connexion with paragraph 64—Ethics of Consultation) by SALFORD DIVISION:

That the following principles dealing with the ethics of medical consultation be approved:

(*a*) When a patient who has not previously been seen in consultation calls on a consultant at his rooms without introduction from a general practitioner, inquiry should be made in every case as to whether the patient is under the care of any practitioner.

(*b*) If it is ascertained that the patient is not under the care of another practitioner, there is nothing ethically wrong in the consultant prescribing at his rooms for the patient; but it is inadvisable for any practitioner who wishes recognition as a consultant to attend any patient at the patient's own house except in co-operation with a general practitioner.

(*c*) If it is ascertained that the patient is under the care of another practitioner, it is the duty of the consultant to use every endeavour to persuade the patient to allow him to communicate with the attending practitioner, but should the patient refuse this permission, the consultant has the right to make an examination and to express an opinion, but not to undertake the treatment of the case.

(SUPPLEMENT, April 23rd.

Uniform Ethical Rules for Association.

37. **Rider** by WATFORD AND HARROW DIVISION:

That it is desirable that all Members of the Association should be bound by a uniform Code of Ethical Rules instead of having varying codes for different Divisions.

(SUPPLEMENT, April 23rd.)

MEDICO-POLITICAL.

Rules of Nursing Associations.

38. **Motion**: That the following Recommendation of Council be adopted (paragraph 87, page 272):

That the following Model Rules for inclusion in the Rules of District Nursing Associations be adopted in place of those approved by the Annual Representative Meeting, 1909 (Minute 128):

1. The nurse shall in every case carry out the directions of the Registered Medical Practitioner in attendance.

2. The nurse, when requested in an emergency, may visit and render first aid to any person without awaiting instructions from a doctor.

3. If, in the nurse's opinion, the attendance of a doctor is necessary, she must insist that he be sent for; and if for any reason his services are not immediately available, she must, if the case be still one of urgency, remain with the patient and do her best until he arrive, or until the emergency is over.

Should the advice to call in a doctor be not acted upon, the nurse must at once leave and report the case to her Secretary, and must not attend again except in case of fresh emergency.

4. Should any further attendance be requested by the patient after the emergency is over, the nurse must explain that the doctor will decide whether or not this is necessary.

5. No attendance after a first visit shall be given by a nurse unless she has informed a doctor and received his instructions with regard to the case, if any.

6. Apart from her duties as a certified midwife, a nurse must on no account prescribe or administer on her own responsibility such drugs for her patients as should only be prescribed by a medical man.

7. It is desirable to obtain the co-operation of all the medical men in the district, and in the larger associations to obtain, if possible, the assistance of one or more of them on the Committee.

(Attention is drawn to the fact that the machinery of the local Divisions of the British Medical Association is available for this purpose.)

8. No midwife in the employment of a Nursing Association should accept an engagement without first asking the patient to state and herself registering, the name of the doctor to be called in should any emergency arise.

9. A nurse shall in no case attempt to influence a patient in the choice of a doctor.

10. No person shall be employed by the ..... Association as a midwife, or received for training as a midwife, without having first signed an agreement not to practise as a midwife within a radius of.....miles from.....within a period of.....after leaving the service of the Association, without the consent in writing of the Association.

NOTE.—For the Model Rules as adopted at Belfast *see* Appendix E, page 247.

Instruction in Hygiene, Nursing, First Aid, etc.

39. **Motion**: That the following Recommendation o Council be adopted (paragraph 101, page 274):

That Members of the Medical Profession should be suitably remunerated for teaching subjects in connexion with the Public Health, such as Nursing, First Aid to the Injured, and Hygiene, and that the fee adopted by the London County Council of £1 1s. for each lecture is one which appears suitable for general adoption.

Ambulance Lectures to British Red Cross Society.

40. **Rider** by WINCHESTER DIVISION:

That a fee should be charged for ambulance lectures given to the British Red Cross Society, and that the fee be £5 5s. for each course of lectures.

(SUPPLEMENT, April 23rd.)

41. **Motion**: That the remainder of the Report of Council under heading "Medico Political" (paragraphs 73 to 112, pages 271–275) be approved.

Prescribing by Chemists.

42. **Rider** (in connexion with paragraph 97, page 273, Unqualified Practice—Appointment of Royal Commission) by EAST NORFOLK DIVISION:

That the British Medical Association should take immediate steps to stop illegal prescribing by chemists, as also the indiscriminate sale by them of abortifacients.

(SUPPLEMENT, April 23rd.)

Riders by Coroners' Juries to their Verdicts.

43. **Rider** by MANCHESTER SOUTH DIVISION:

That whereas the Report of the Coroners Departmental Committee recognizes the appending of a rider by the jury to their verdict, and in view of the fact that a rider is a judgement (frequently carrying with it a severe penalty) on one who is not on trial, who has no opportunity of defence and who may be absent or entirely ignorant of what is taking place, and is therefore an infraction of every principle of law and justice, it be an instruction to the Council to oppose to the uttermost in future legislation any such right of a jury to add a rider.

(SUPPLEMENT, April 23rd.)

Parliamentary Representation.

44. **Rider** by CHELSEA DIVISION:

That this Meeting recognizes the necessity for a Union of Medical Practitioners with Parliamentary representation, and requests the Council of the British Medical Association to ascertain the wishes of Members in the United Kingdom by referendum at the earliest possible date.

(SUPPLEMENT, April 23rd.)

PUBLIC HEALTH AND POOR LAW.

45. **Motion**: That the Report of Council under heading "Public Health and Poor Law," paragraphs 113–124, pages 275–276) be approved.

Medical Officers of Health.

46. **Amendment** (arising out of paragraphs 113–5 of Report of Council, page 275) by RICHMOND, ROCHDALE, and SALFORD DIVISIONS:

That Minute 234 of the Annual Representative Meeting, 1909, be rescinded.

Minute 234 Referred to.

[Resolved: That the Recommendation of the Committee, as amended, be approved, namely:

That in the interests of the public health, and in view of the multiplicity of duties thrown upon medical officers of health by recent enactments, it is desirable that, in future appointments, medical officers of health should be required to

devote their whole time to the duties of their office, and be debarred from private practice, except as consultants; that they should be adequately paid, and, if necessary, districts should be grouped for the purpose; and that it is further desirable that medical officers of health should be protected in carrying out their duties, and be secured from capricious dismissal or reduction of salary, and that they be allowed to participate in any superannuation scheme approved by a Local Government Board.)

(SUPPLEMENT, April 23rd.)]

[For the convenience of Representatives the Report which was before the Annual Representative Meeting, 1909, and upon consideration of which the above Resolution was carried, is appended. *See* Appendix F.]

47. **Rider** by ROCHDALE DIVISION:

That in the interests of public health medical officers of health should have security of tenure, and that in all boroughs and large urban districts, where practicable, whole-time appointments be made with adequate salary.

(SUPPLEMENT, April 23rd.)

Medical Appointments in Public Medical Services in General.

48. **Rider** by SALFORD DIVISION:

That in every form of public medical service the system of part-time appointments of medical practitioners should be maintained as far as such appointments can be made consistently with the requirements of the services, and that all public medical officers should be protected in carrying out their duties, should be secured from capricious dismissal or reduction of salary, and should be allowed to participate in any superannuation scheme approved by a Local Government Board.

(SUPPLEMENT, April 23rd.)

Pathological Branch of Public Health Service.

49. **Rider** by BRIGHTON DIVISION:

That the Central Council of the Association do seek information from the Divisions as to the need for a pathological branch of the public health service, and report on the same to the Annual Meeting of 1911.

(SUPPLEMENT, April 23rd.)

HOSPITALS.

Payment for Compensation Certificates.

50. **Motion:** That the following Recommendation of Council be adopted (paragraph 125, page 276):

That the fee for a certificate of the kind referred to in Minute 148 of the Representative Meeting, 1909, should not be less than one guinea.

[Minute 148 of Annual Representative Meeting, 1909, referred to:

148. Resolved: That, in the opinion of the Representative Meeting, any member of an honorary or paid medical or surgical staff of a hospital who signs any certificate or gives any report on any case under the Workmen's Compensation Act, ought to receive personally the usual fee in full.]

51. **Motion:** That the remainder of the Report of Council under heading "Hospitals" (paragraphs 125-130, page 276) be approved.

Payment of Hospital Staffs.

52. **Rider** by WINCHESTER DIVISION:

That the Council be instructed to prepare a Report for consideration of the Divisions and the Representative Meeting on the advisability of all members of the Staffs of Voluntary Hospitals being paid for their services.

(SUPPLEMENT, April 23rd.)

NAVAL AND MILITARY.

53. **Motion:** That the Report of Council under heading "Naval and Military" (paragraphs 131-4, pages 276-277) be approved.

SCOTLAND.

54. **Motion:** That the Report of Council under heading "Scotland" (paragraphs 135-8, page 277) be approved.

IRELAND.

55. **Motion:** That the Report of Council under heading "Ireland" (paragraphs 139-40, page 277) be approved.

THE BRANCHES OUTSIDE THE UNITED KINGDOM.

56. **Motion:** That the Report of Council under heading "The Branches outside the United Kingdom" (paragraphs 141-4, page 277) be approved.

GENERAL APPROVAL OF ANNUAL REPORT.

57. **Motion:** That, subject to the Amendments and other Resolutions adopted by the Meeting with reference thereto, the Annual Report of Council be approved as a whole.

D. Special Reports of Council (if any).

E. Election of Officers.

Elect a Chairman of Representative Meetings and a Deputy Chairman of Representative Meetings for the year 1910-11.

F. Election of Council.

(i) Election of 12 Members of Council by Grouped Representatives. [For Nomination Forms and Voting Papers *see* Appendices B and C, pages 245, 246.]

(ii) Election of Members of Council to represent Royal Navy Medical Service, Army Medical Service, and Indian Medical Service.

G. Election of Committees.

Election of members of Finance, Organization, Journal, Central Ethical, Medico-Political, Public Health, Hospitals, Naval and Military, and Colonial Committees; and other Committees, if any.

H. Standing Orders.

Consider proposed amendments of Standing Orders, other than those relating to the order of business.

I. Any other Business.

J. Confirm Minutes.

By Order,

J. SMITH WHITAKER,
Medical Secretary.

APPENDIX A.

STANDING ORDERS

RELATIVE TO

BUSINESS AT REPRESENTATIVE MEETINGS

(As adopted at Belfast. 1909).

I.—ORDER OF BUSINESS.

(A) *Annual Representative Meeting.*

1. Except as may be otherwise determined in the manner prescribed by the Standing Orders, the order of business shall be as follows:

i. **Election Returns.**—Receive the return of the Election of Representatives of Divisions for the year, and receive notices, if any, of the appointment of substitutes for Representatives under Article XXX.

ii. **Standing Orders.**—Adopt Standing Orders.

iii. **Annual Report of Council.**—Receive the Annual Report of the Council and Financial Estimate, presented under By-law 35, and consider motions relating to the adoption thereof in whole or in part.

iv. **Special Reports of Council.**—Receive Special Reports of the Council, if any, in the order in which the Council shall submit them for consideration, and consider motions for the adoption thereof in whole or in part.

v. **Reports of Committees (if any).**—Receive Reports of Committees, if any, and consider motions for the adoption of the same in whole or in part.

vi. **Consider By-laws.**—Consider, in such order as the Meeting shall determine, any motions placed upon the Agenda of the Meeting by which it is proposed to make By-laws or to alter or repeal existing By-laws.

vii. **Consider other Motions by Divisions or Branches.**—Consider, in such order as the Meeting shall determine, any motions placed upon the Agenda of the Meeting by Divisions or Branches, relating to the honour and interests of the Medical Profession or of the Association.

viii. **Election of Officers.**—Elect a Chairman of Representative Meetings and a Deputy-Chairman of Representative Meetings for the year.

ix. **Election of Members of Medico-Political and Ethical Committees.**—Elect at such time before the conclusion of the third day's proceedings, as the Chairman may, pursuant to Standing Order III, 16, prescribe:

(*a*) Six Members of the Association to serve on the Medico-Political Committee for the ensuing year.

(*b*) Five Members of the Association to serve on the Ethical Committee for the ensuing year.

(*c*) Such Members of other Committees, if any, as it falls to the Representative Meeting to elect.

x. **Amendment of Standing Orders.**—Consider proposed amendments of Standing Orders other than those relating to the order of business.

2. **General Order of Daily Sessions: Confirmation of Minutes.**—The matters described in Clause 1 shall be considered in the order therein prescribed, or as otherwise duly determined, from day to day until the completion thereof, or until the expiration of four days from the first day of the Meeting, whichever shall first occur; provided that at each daily session after the first the Meeting shall, before proceeding to the consideration of the matters aforesaid, (A) confirm the Minutes of the Proceedings of the previous daily session; (B) consider motions, if any, relating to the order of business of the day. At the conclusion of the business of the last daily sssion the Meeting shall confirm the Minutes thereof for presentation to the Council.

3. **Hours of Daily Sessions.**—All Representative Meetings not concluded by 6.30 p.m. shall stand adjourned either to 8 p.m. of the same day, or to the next day, as may be decided by a show of hands. All such Meetings shall stand adjourned at 10 p.m.

4. **Varying Order of Business.**—The order of business may be varied, either at the commencement or after the expiration of two hours from the commencement of any daily session, by the vote of two-thirds of those present and voting.

5. **Precedence of Motions of which Notice Given.**—Motions and amendments of which notice shall have been given to the Secretary of the Meeting in time for them to be circulated with the Minutes of the previous day's proceedings, shall have precedence, in the order in which such notice shall have been given, over those relating to the same subject, or otherwise having a like claim to precedence in the order of business, of which such notice has not been given.

6. **Motions on the Same Subject.**—If two or more of the motions placed on the Agenda of the Meeting by the Council and by Divisions and Branches shall appear to the Chairman to relate to the same subject he shall ascertain the will of the Meeting in respect of the consideration of one of such motions as an original motion, and of the others as amendments thereto, in such order as the Meeting may determine.

7. **Motions on Subjects dealt with in Reports.**—If any Motion placed upon the Agenda shall in the opinion of the Chairman relate to the same subject as a Recommendation or other portion of a Report submitted by the Council or by a Committee, the Chairman shall ascertain the will of the Meeting as to whether the said Motion shall be considered as an Amendment or Rider to the adoption or approval of the said Recommendation or other portion of a Report.

8. **Resolutions involving Special Expenditure.** — Every Resolution involving special expenditure shall, before final adoption by the Representative Meeting, be remitted to the Finance Committee for report to a later Session.

(B)—*Special Representative Meetings.*

1. **Read Authority for Convening Meeting.**—Read the Resolution of Council, or the requisition from Divisions, in pursuance of which the Meeting is convened.

2. **Notice of Substitutes.**—Receive notices, if any, of the appointment of substitutes for Representatives.

3. **Order of Business.**—If the Meeting is convened to consider more than one matter, determine the order in which such matters shall be considered.

4. **Special Business.**—Consider the matters which the Meeting is specifically convened to consider, in order determined by the Meeting.

5. **Minutes.**—Confirm the Minutes of the Meeting for presentation to the Council.

II.—COMPOSITION AND ARRANGEMENT OF THE MEETING.

1. **Composition.**—The persons constituting the Meeting, hereinafter called members of the Meeting, shall be those duly elected Representatives of Divisions, or substitutes duly appointed under Article XXX and By-law 19, of whose election or appointment the

General Secretary shall have received due notice, together with Members of Council for the time being.

2. Arrangement.—Distinctive seats shall be provided for the following groups of persons respectively, namely:

(A) Representatives of Divisions.

(B) Members of Council who are not Representatives of Divisions or Officers of the Association.

(C) Officers of the Association, present in virtue of their office, or at the request of the Meeting, for the assistance thereof.

(D) Members of the Association who are not Representatives of Divisions or Members of Council.

(E) Reporters representing such journals as may be authorized by the Chairman, subject to the approval of the Meeting.

3. Withdrawal of Strangers.—It shall be competent at any time for a member of the Meeting to move that persons who are not members of the Meeting be requested to withdraw, or that persons who are not members of the Association be requested to withdraw, but it shall rest in the discretion of the Chairman to submit or not to submit such motion to the Meeting.

III.—PROCEDURE.

1. Temporary Chairman.—In the absence of the Chairman of Representative Meetings, the Deputy Chairman shall preside; or, if he be also absent, the Chairman of Council or the Treasurer, if present, shall take the chair, and call upon the Meeting to appoint a temporary Chairman.

2. Minutes.—Minutes shall be taken of the proceedings of the Meeting, and the same shall be duly entered in a book provided for the purpose. The Minutes of each daily session of the Annual Representative Meeting shall be printed and circulated to the members of the Meeting. Minutes (if) (when) printed in the Daily Journal of the Annual Meeting shall be deemed thereby to have been circulated as required by this order.

3. Attendance.—No Representative shall leave the Meeting without permission obtained personally from the Chairman at the time of leaving. If during any daily session of a Representative Meeting it shall at any time appear to the Chairman that a quorum is not present, the roll shall be called of Representatives appointed to attend the Meeting, and those Representatives who are found to be then absent, not having previously obtained leave from the Chairman, shall be deemed to have been absent from the said session. A list of members reported as absent from any daily session or sessions of a Representative Meeting shall be supplied at the close of such Meeting to the Chairman and shall by him be transmitted to the Council, together with such explanations of the cause of absence as any members so reported may have furnished to him in writing.

4. Reports: Notice.—Subject as hereinbefore provided' no Report by the Council, or by a Committee, to the Representative Meeting shall be considered by the Meeting unless it shall have been sent to the Divisions and published in the JOURNAL at least one month before such Meeting. The exceptions to this rule shall be—

(A) That the Council shall submit, in addition to their Annual Report, a Supplementary Report dealing with those matters of importance, arising subsequent to the issue of the Annual Report, in which action has been taken, or action by the Representative Meeting is recommended.

(B) That any Special Committee appointed by the Representative Meeting shall report in accordance with the terms of the instructions given to such Committee by the Meeting.

5. Form of Reports.—Reports of Council and Reports, if any, of Standing Committees, to the Representative Meeting shall comprise the following:

(A) A list of matters referred by the Representative Meeting to the Council or Committee.

(B) Reports with specific recommendations upon all matters in which the Council or Committee considers that action should be taken involving a new declaration of policy or expenditure not already authorized.

(C) A short report of all action taken by the Council or Committee in accordance with instructions of the Meeting.

(D) A list of matters under consideration but not completed.

6. Presentation of Reports.—The Report of the Council or of a Committee shall be presented by the Chairman, or, in his absence, by a Member, of the body submitting such Report, who shall move:

(1) That the Report be received.

(2) That the Recommendations, if any, be adopted.

(3) That the rest of the Report be approved.

The adoption of each Recommendation shall be the subject of a separate motion. The approval of the rest of the Report shall be moved as a whole, unless the Chairman rule or the Meeting resolve that the approval of each paragraph, or of any specified paragraph, be the subject of a separate Motion.

7. Amendments and Riders.—

(1) To a motion that the Report be received, no amendment shall be moved.

(2) To a motion that a Recommendation be adopted, amendments may be moved.

(3) To a motion that a Report, or a specified paragraph of a Report, be approved, an amendment may be moved to the effect that the Meeting do disagree with, or do refer back to the Committee, any specified portion thereof, or that with reference thereto the meeting do express an opinion in terms stated.

8. Procedure as to Other Motions.—Motions placed on the Agenda of the Meeting by a Branch shall be introduced by a member of Council elected by the Branch, and motions so placed by a Division shall be introduced by the Representative thereof.

9. Absence of Authorized Mover of Adoption of Report or Other Motion.—In the absence of any member authorized to make any motion referred to in Standing Order III, any other member deputed by such member may make such motion on his behalf, and if no member shall have been so deputed, such motion shall be made formally by the Chairman.

10. Seconding Motions.—No seconder shall be required for any of the motions referred to in Standing Orders III, 6 and 8. All other motions and all amendments shall be required to be moved and seconded.

11. References to Central Executive.—Each motion or amendment which is of the nature of an instruction or reference to any central executive body, other than a Committee specially appointed by the Representative Meeting, shall be moved in the form of an instruction or a reference to the Council.

12. Recission of Resolutions.—No motion to rescind any resolution of a Representative Meeting, arrived at after due consideration of the Divisions, shall be in order at any subsequent Representative Meeting, unless at least two months' notice of such proposed motion shall have been given to the Divisions through the SUPPLEMENT to the JOURNAL.

13. Time Limits of Speeches.—(A) A member of the Meeting shall be allowed to speak for fifteen minutes in moving a resolution which does not require seconding, and for ten minutes in moving any other resolution, or any amendment. Except as aforesaid, no speech shall exceed five minutes.

Reducing Time Limit.—(B) The Meeting may at any period of any session reduce the time to be allowed to speakers, whether in moving resolutions or otherwise, during the remainder of such session.

14. Mode of Voting—Show of Hands.—Only Representatives of Divisions shall vote on any question before the Meeting.

Voting shall be by show of hands, except in the cases following, namely:

Vote by Card.—(A) If, upon the Chairman proceeding to take the vote of the Meeting upon any motion or amendment, any Representative of a Division shall move that the said vote be taken by card, and twenty Representatives rise in their places in support of such motion, the vote shall be taken by card, and the names of those voting for and against such motion or amendment, of those not voting, and of the Constituencies which they severally represent, shall be entered on the Minutes.

Division.—(B) If the Chairman, after taking a vote by show of hands upon any motion or amendment, shall be of opinion that the numbers of members voting for and against such motion or amendment are not thereby ascertained with sufficient accuracy, he shall have power to direct that the Meeting shall divide upon the said motion or amendment.

15. Election of Chairman and Deputy Chairman of Representative Meetings.

NOMINATION.

Nominations for the office of Chairman of Representative Meetings, and Deputy Chairman of Representative Meetings for the year, shall be handed in writing to the Secretary of the Meeting not later than the termination of the second day's proceedings. Each nomination shall be signed by the nominator, and shall contain a declaration that the candidate nominated has agreed to serve.

VOTING.

The names of all candidates duly nominated shall be placed in a voting paper, which shall be issued and collected at such times as the meeting shall direct. Each voter shall number the names of the candidates for each office in the order of his preference.

SCRUTINY.

The Scrutineers shall proceed as follows:

(a) *Count.*

On the first count each candidate shall be credited with the number of votes given by those voters who have numbered him (1), and if any candidate be found to have received an absolute majority of votes cast he shall be declared to be elected.

(b) *Exclusion and Transfer.*

If no candidate be thus elected, that candidate who has received fewest votes shall be excluded, and his votes shall be transferred to the candidates respectively numbered as next preference on his voting papers, and any candidate now found to have an absolute majority shall be declared to be elected.

(c) If, after the first transfer, no candidate be declared to be elected, the procedure of exclusion and transfer shall be repeated, and so on until one candidate is declared to be elected.

(d) *Exceptions.*

(1) If on a count between three candidates no candidate be found to be elected, and the candidates who have fewer have an equal number of votes, the preferences on the voting papers of the highest candidate shall, for the time being, be credited to the other two candidates, and that candidate who has fewer votes shall be excluded.

(2) If on a count between two candidates, after the others have been excluded, the votes are equal, that candidate who has the larger number of first preference votes shall be declared to be elected.

(3) In any case of equality subsisting after this procedure, one of the candidates shall be excluded by lot.

(4) Any voting paper shall become invalid if its preferences be exhausted before a candidate is declared elected.

ENTRANCE INTO OFFICE.

Except with regard to *ex officio* membership of Council and Committees, the Chairman and Deputy Chairman so elected shall not assume their functions until the close of the Annual Meeting.

16. Election of Committees.—Nominations for election by the Representative Meeting of members of Standing Committees shall be handed in writing to the Secretary of the Meeting not later than the termination of the second day's proceedings. Each nomination shall be signed by the nominator and shall contain a declaration that the candidate nominated has agreed to serve. No member shall be eligible for nomination who, having been a member of a Standing Committee during the previous year, shall have failed to attend at least half the meetings of the Committee for that year. The names of all candidates duly nominated shall be included in a voting paper issued to each voter, and shall be arranged in three lists, one of those residing in England and Wales, one of those residing in Scotland, and one of those residing in Ireland. Each voter shall be entitled to vote for not more candidates than there are members to be elected, and of these not more than two-thirds of the total number shall be those of candidates in the English list, not more than one-fourth in the Scottish list, and not more than one-fourth in the Irish list. In counting the votes, the candidates on the English list who have obtained the highest number of votes, being not more than one-half of the total number of members to be elected, the candidates on the Scottish list who have obtained the highest number of votes, being not more than one-fourth of the total number to be elected, and the candidates on the Irish list who have obtained the highest number of votes, being not more than one-fourth of the total number to be elected, shall be deemed to be elected. If any place on the Committee be still vacant, that candidate or those candidates shall be deemed to be elected who shall have obtained the highest number of votes irrespective of the list in which the name of any such candidate appears. Scrutineers to conduct the election shall be nominated by the Chairman, and the details of the voting shall be placed before and verified by the Chairman before being declared to the Meeting.

IV.—RULES OF DEBATE.

1. Every member shall be seated except the one who may be addressing the Meeting, and when the Chairman rises no one shall continue standing, nor shall any one rise until the Chair is resumed.

2. A member of the Meeting shall stand when speaking, and shall address the Chair.

3. A member who speaks shall direct his speech strictly to the motion under discussion, or to a motion or amendment to be proposed by himself, or to a question of order.

4. A member shall not address the Meeting more than once on any motion or amendment, but the mover of an original resolution may reply, and in his reply shall strictly confine himself to answering previous speakers, and shall not introduce any new matter into the debate; provided always that a member may speak to a point of order, or, by consent of the Meeting, in explanation of some material part of a speech made by him, which he believes to have been misunderstood.

5. A motion or amendment once made and seconded shall not be altered or withdrawn without the consent of the Meeting.

6. An amendment shall be either—

To leave out words;
To leave out words and insert or add others;
To insert or add words;

or in such form as shall be approved of by the Chairman, provided always that the amendment be relevant to the motion on which it is moved, and be not equivalent to the direct negative thereof.

7. No notice of motion, or amendment to any motion before the Meeting, not already published, shall be considered by the Meeting until a copy of the same with the name of the proposer has been handed in in writing to the Chairman.

8. Whenever an amendment upon an original motion has been moved and seconded no second or subsequent amendment shall be moved until the first amendment shall have been disposed of, but notice of any number of amendments may be given.

9. If any amendment be rejected other amendments may be moved on the original motion. If an amendment be carried, the amendment, or motion as amended, shall take the place of the original motion, and shall become the question upon which any further amendment may be moved.

10. If it be proposed and seconded that the Meeting do now adjourn, or that the debate be adjourned, or that the Meeting do proceed to the next business, or that the question be now put, such motion shall immediately be put to the vote without discussion, except as to the time of adjournment, provided always that the Chairman shall have power to decline to put to the Meeting the motions that the Meeting do proceed to the next business, or that the question be now put.

11. A motion that the Meeting do now adjourn, or that the Meeting do now proceed to the next business, or that the debate be now adjourned, or that the question be now put, shall not be made within a period of one hour after a previous motion to the like effect, unless, in the opinion of the Chairman, the circumstances are materially altered.

12. Smoking shall not be allowed during such time as the Chairman is in the Chair.

V.—SUSPENSION OF STANDING ORDERS.

Any one or more of the Standing Orders, in any case of urgency, or upon motion made on notice given through the Daily Journal, may be suspended at any Meeting, so far as regards any business of such Meeting, provided that three-fourths of those present and voting shall so decide.

APPENDIX B.

Nomination Form.

BRITISH MEDICAL ASSOCIATION.

ANNUAL REPRESENTATIVE MEETING, 1910.

ELECTION OF CENTRAL COUNCIL, 1910–11.

By-law 23 (c).—Election of Twelve Members of Council by the Representatives in Representative Meetings grouped topographically.

Nomination Form.

(I) BY A DIVISION.

Branches included in the Group—

.....

.....

.....

Constituencies in the Group—

.....

.....

.....

By instruction of the Division I hereby nominate

.....

of .....

.....

as a candidate for election by the Representatives of Constituencies in the above-mentioned group as a member of the Central Council of the Association.

.....
Honorary Secretary.

.....
Division.

July , 1910.

I hereby declare my willingness to serve, if elected, as a member of the Central Council for the year 1910–11.

Candidate's Signature.....

July , 1910.

BRITISH MEDICAL ASSOCIATION.

ANNUAL REPRESENTATIVE MEETING, 1910.

ELECTION OF CENTRAL COUNCIL, 1910–11.

By-law 23 (c).—Election of Twelve Members of Council by the Representatives in Representative Meetings grouped topographically.

Nomination Form.

(II) BY A REPRESENTATIVE OF A DIVISION INCLUDED IN THE GROUP.

Branches included in the Group—

.....

.....

.....

Constituencies in the Group—

.....

.....

.....

I, the undersigned, hereby nominate

.....

of.....

.....

as a candidate for election by the Representatives of Constituencies in the above-mentioned group as a member of the Central Council of the Association.

.....

Representative.

.....*Division.*

July , 1910.

I hereby declare my willingness to serve, if elected, as a member of the Central Council for the year 1910–11.

Candidate's Signature .....

July , 1910.

APPENDIX C.

Form of Voting Paper.

BRITISH MEDICAL ASSOCIATION.

ANNUAL REPRESENTATIVE MEETING, 1910.

Election of Twelve Members of the Central Council by the Representatives in Representative Meetings grouped topographically.

Group.....

Branches included in the group—

Constituencies in the Group.	*Representatives.*
.....	.....
.....	.....
.....	.....

The following Members of the Association have been duly nominated as candidates for election, and have expressed their willingness to serve.

Names and addresses of candidates:—

.....

.....

.....

.....

.....

.....

Each voter is requested to mark with a **X** the name of not more than one candidate, and to sign the paper at the foot, stating the name of the Constituency which he represents, and of the Branch to which it belongs.

Signature of voter.....

Constituency represented .....

..... *Branch*

APPENDIX D.

Grouping of Branches not in United Kingdom, approved by Council, January 26th, 1910.

Branches, and Membership of each.	Membership of Group.	Members of Council to be elected.
South Australian ... ... 157 Western Australian ... ... 99 Melbourne and Victoria ... 464	720	1
Sydney and New South Wales 693 Brisbane and Queensland ... 164	857	1
New Zealand 421	421	1
Ottawa (no Branch) ... ... 10 Quebec (no Branch) ... ... 12 Montreal ... ... 57 Halifax, Nova Scotia ... ... 77 Bermuda... ... ... 13 St. John, New Brunswick ... 37 Saskatchewan ... ... 27 Toronto ... ... 328 Manitoba and West of Canada (no Branch) ... ... 32 British Columbia (no Branch) 32	625	1
Barbadoes ... ... 34 Jamaica ... ... 47 Trinidad and Tobago ... ... 26 Leeward Islands ... ... 15 British Guiana 40	162	1
Bombay ... ... 155 Punjab (no Branch) ... ... 21 Bengal (no Branch) Burma ... ... 63 South Indian and Madras ... 166 Colombo, Ceylon ... ... 147 *Assam ... ... 23 Malaya ... ... 88 Hong Kong and China... ... 121	784	1
Cape of Good Hope (Western) 137 Cape of Good Hope (Eastern) 52 Cape of Good Hope (Border)... 60 Griqualand West (including Orange River Colony) ... 36 Transvaal ... ... 104 Natal ... ... 121 West Africa (no Branch) ... 80 Egyptian... ... ... 37 Malta and Mediterranean ... 31 Gibraltar ... ... 19 Members on Continent of Europe (no Branches)	677	1

* New Branch.

APPENDIX E.

Model Rules for Suggestion by Divisions for Inclusion in the Rules of District Nursing Associations (as adopted by the Annual Representative Meeting, Belfast).

That, in the opinion of the Representative Meeting, the following Rules are suitable for suggestion by Divisions as Model Rules for inclusion in the rules of local District Nursing Associations:

(1) The nurse shall in every case carry out the directions of the Registered Medical Practitioner in attendance.

(2) The nurse, when requested in an emergency, may visit and render first aid to any person without awaiting instruction from a doctor.

(3) If, in the nurse's opinion, the attendance of a doctor is necessary, she must insist that he be sent for; and if for any reason his services are not immediately available, she must, if the case be still one of urgency, remain with the patient and do her best until he arrive or until the emergency is over.

Should the patient refuse to have a doctor, the nurse must at once leave and report the case to her Secretary.

(4) Should any further attendance be requested by the patient after the emergency is over, the nurse must explain that the doctor will decide whether or not this is necessary.

(5) No attendance after a first visit shall be given by a nurse unless she has received directions with regard to the case from a doctor.

(6) Apart from her duties as a certificated midwife, no nurse is allowed to administer on her own responsibility or prescribe any sort of drug for internal use.

(7) The Association shall consist of all Subscribers of ..... and donors of ..... to the Association, together with all registered medical practitioners resident and practising in the area of the Association.

(8) No midwife in the employment of a Nursing Association should accept an engagement without first asking the patient to state, and herself registering the name of, the doctor to be called in, should any emergency arise.

(9) A nurse shall in no case attempt to influence a patient in the choice of a doctor.

Resolved: That it be referred to the Council to draft a suitable Rule to give effect to the principle of the following Motion:

That, in order to protect her employers and the local medical profession, any midwife or woman employed to be trained as a midwife by a Nursing Association or similar Body, should be required, previous to her engagement, to enter into a bond not to practise midwifery for a certain period of time, and within a certain radius after leaving the service of her employers.

APPENDIX F.

PUBLIC HEALTH COMMITTEE.

REPORT

ON

DESIRABILITY OF HEALTH OFFICERS BEING REQUIRED TO GIVE THEIR WHOLE TIME TO THE WORK (AS SUBMITTED TO THE ANNUAL REPRESENTATIVE MEETING, BELFAST).

INTRODUCTORY.

The Annual Representative Meeting at Sheffield instructed the Council to refer the following proposition for the consideration of the Divisions:

That Health Officers should give their whole time to the work.

The Council has thought it desirable that the Divisions should have the assistance in their deliberations of an explanatory Memorandum prepared by the Public Health Committee, which is now submitted accordingly.

The object of the Memorandum is to set forth as clearly and impartially as possible the more important considerations, on both sides of the question, which require duly weighing before any decision is arrived at. It is proposed that upon receipt of the expressions of opinion of the Divisions, a Report indicating a definite policy in accordance with the general tenor of those replies shall be prepared, which, after submission to the Divisions and adoption, if approved, by the Annual Representative Meeting, will constitute the declared policy of the Association on the subject.

REFERENCE.

As there is possibility of doubt as to the intended scope of the proposition stated in the Resolution of the Representative Meeting, the Committee thinks it well to make clear the exact question which it understands that the Divisions are desired to discuss—namely, that by the term "Health Officers" are to be understood for the present purpose Medical Officers of Health only, and that by "giving their whole time to the work" is meant to their public work as distinguished from private practice.

If these assumptions are correct, the question referred may conveniently be stated as follows:

Should Medical Officers of Health be debarred from engaging in private practice?

For the information of the Divisions, it may be stated that Medical Officers of Health appointed by County Councils are already required (by Section 17 of the Local Government Act, 1888) to devote their whole time to the duties of the office.

A.—*Reasons in Favour of Whole-time Appointments.*

The more important reasons which have at various times been assigned in favour of whole-time appointments are:

(1) That the duties are usually of such a character as to need the undivided attention of the officer, and should not be liable to suffer from the conflicting claims of private practice upon his time and energies.

(2) That the statutory and other responsibilities of a Medical Officer of Health are such as may frequently make it his duty to take action prejudicial to the interests of individuals, some of whom, if he is engaged in private practice, may be his patients, and that he ought not to be put in the position of having to choose between offending them and neglecting the enforcement of the law.

(3) That, apart from questions specially affecting his own patients, a medical officer engaged in private practice is more likely to be influenced by local prejudices than a whole-time officer.

(4) That specialization in public health work is desirable.

(5) That the appointment of whole-time officers is preferable, from the purely professional point of view, because (*a*) there is less likelihood of friction arising in their case than in that of part-time officers when their public duties bring them into contact with the private patients of other practitioners, (*b*) because a Medical Officer of Health who is engaged in private practice receives, in his official capacity, introductions to potential patients in ways which, though perfectly legitimate, are not open to his fellow practitioners in the same district.

(6) As showing the tendency of public opinion among those who give special attention to Public Health, it is to be noted that the Royal Commission on Labour, the Housing Commission of 1885, and the Select Committee on the Housing of the Working Classes Acts Amendment Bill of 1906, have all reported in favour of the Medical Officer of Health giving his whole time to the work, coupling with this a recommendation that he be given reasonable security of tenure of office. The views held by the Local Government Board, as indicated in the Reports issued from the Medical Department of the Board during many years past, and more particularly of late years, are very distinctly in favour of Medical Officers of Health being debarred from private practice.

B.—*Reasons Against Whole-time Appointments.*

As against the adoption of a uniform rule of whole-time appointments it is urged:

(1) That the appointment of part-time officers is more economical, particularly in the case of thinly populated rural districts, many of which could not by themselves afford the salaries of whole-time officers.

(2) That if such districts are in all cases (as already in some cases) combined into districts large enough to pay an adequate salary to a whole-time officer, the needs of each locality cannot receive the same close and prompt attention as from several part-time officers.

(3) That for the same amount of salary practitioners of a higher professional standing can be obtained if they are allowed to engage also in private practice than if they are required to give their whole time to the work.

(4) That the clinical experience and the closer knowledge of the homes of people obtained in private practice increase the usefulness of the Medical Officer of Health.

(5) That from the professional point of view it is preferable that the emoluments should be distributed over a larger number of members of the profession than would be the case if all such appointments were whole-time.

N.B.—It will be understood that the above paragraphs, headed A and B, are simply statements of views put forward by advocates of either opinion, and do not in either case necessarily express the opinions of the Committee.

Question Submitted.

The Division is requested to express its opinion for or against the proposition,

"That Medical Officers of Health should be debarred from engaging in private practice,"

and to add any qualifications, comments, or additional suggestions bearing on the matter which it may desire.

British Medical Association.

ANNUAL REPORT OF COUNCIL.

1. The Council is glad to say that the British Medical Association, after an interval of fifteen years, is again to hold its Annual Meeting in London.

Under the distinguished presidency of Mr. Henry T. Butlin, President of the Royal College of Surgeons, the scientific work and deliberations as to general policy at the 78th Annual Meeting are assured of being worthy of the best traditions of the Association.

THE BELFAST MEETING.

2. The Council takes this opportunity of again congratulating Sir William Whitla, and those who worked with him, on the great success of their labours for the comfort and enjoyment of all who attended the Belfast meeting.

In this connexion the Council and the Members of the Association at large much appreciated the great personal interest shown by Their Excellencies the Viceroy of Ireland and Lady Aberdeen in their daily attendances at the Meetings.

RETIREMENT OF CHAIRMAN OF COUNCIL AND TREASURER.

3. With the presentation of this Report, Mr. Edmund Owen and Dr. Edwin Rayner will have completed three years of office as Chairman of Council and Treasurer respectively.

During the three years for which Mr. Owen has held the office of Chairman of Council it has been necessary to deal with matters of the greatest importance, and most critical character, as affecting the prosperity of the Association and its capacity for promoting the welfare of the Profession. During this difficult period Mr. Owen has conducted the proceedings of the Council with a tact, firmness, and courtesy of which the Council desires to express its deep sense, and furthermore to declare its recognition of the time and energy which Mr. Owen has devoted, outside the Council Chamber, to the affairs of the Association, and of the concern which he has always manifested for its success.

The position of Treasurer has also involved much sacrifice of time, and has demanded close personal attention, as owing to the rebuilding of the premises the resources of the Association have required very careful handling.

The Council desires to place on record its deep appreciation of the valuable work Dr. Rayner has accomplished, and to extend to him, on behalf of the Association, the sincere thanks of all Members for his continuous attention to its affairs.

ATTENDANCES OF COUNCIL AND COMMITTEES.

4. In the SUPPLEMENT to the BRITISH MEDICAL JOURNAL of May 7th will be found the Attendances of Members of the Council, Committees, and Subcommittees. From this it will be seen that the Committee work of the Association has been exceedingly heavy, and the Council takes this opportunity of expressing its deep gratitude to the Chairmen and Members of Committees for their devotion to the interests of the Association.

INSTRUCTIONS OF ANNUAL REPRESENTATIVE MEETING, 1909.

5. A list is appended of all Resolutions of the Annual Representative Meeting at Belfast which contain instructions to the Council. References are given in the list to the paragraphs of the Annual Report in which the action taken under each instruction, and of the present position of the matter, are stated.

FINANCE.

FINANCIAL STATEMENT, 1909.

6. In presenting the Financial Statement for the year ending 31st December, 1909, in comparison with the previous year the expenditure has increased by £1,864, but owing to increased revenue it has been possible to carry £262 more to reserve than in the year 1908.

The liabilities of the Association are somewhat heavier, due primarily to the cost of producing the book "Secret Remedies," but the Assets have increased by £750 due to the sale of the book.

The loan for the rebuilding of the Strand premises stands at the total of £43,754, an amount it is hoped it will not be necessary to increase.

The freehold premises stand in the books at some £605 less than in the previous year, owing to the sale of a small strip of land at the rear of the site.

After meeting all expenses and making reasonable provision for depreciation there is a surplus on the year's working of £995, leaving the Association with a balance of £104,199 of Assets over Liabilities.

(a) *Revenue Account.*

The Revenue or Profit and Loss Account for the year shows that General Association expenses have increased by just on £1,450.

For the first time since the rebuilding of the new premises the burden of finding the interest on the borrowed capital falls upon the current revenue, while during the year only a small proportion of the rent was forthcoming from the ground floor.

The corner shop in the Strand has been let, and as other tenants are found, the Association will feel the benefit of having dealt with its property on a comprehensive basis.

Central Meeting expenses have increased by some £200.

The increased expenditure is not made up in any one sum, but is consequent upon the activities of Committees.

The Poor Law Committee was not sitting in 1908, and has involved an expenditure of £123. Taking the Committees as a whole the expenditure in railway fares represents an increase of £100, and the printings an increase of £80.

(b) *Central Premises Expenses.*

Here the increase shows some £260. With a larger building the cleaning and heating has cost more and the rating of the Strand properties is higher than the temporary premises occupied by the Association.

(c) *Central Printing, Stationery, and Postage.*

An increase is shown here of £96. The general printing has been rather less; the postage in the Medical Secretary's department has increased by close on £40, while the stationery has gone up by £77.

(d) *Central Staff Expenses.*

The £483 additional expenditure is due to the increasing of the salaries of officials, while in the year under review the Association has enjoyed for a full twelve months the services of a Deputy Medical Secretary.

The travelling expenses show an increase due to the Association meeting at some distance from the Head Office.

(e) *Library Account.*

Owing to the rearrangement of the Library, during the year it has been necessary to have the assistance of a clerk.

(f) *Journal Account.*

The production of the JOURNAL would appear to have cost the Association £927 more than in the previous year, but by reference to Schedule G, it will be noticed that the amount charged against the subscriptions of the Association to produce the JOURNAL is less by £851 than in the previous year.

In the Editorial Department the expenditure has varied little. Less was spent on analyses but the legal expenses were increased. The total increase is only £52.

(g) *Managerial.*

Under Managerial Expenses, Compositor's wages and the machining of the JOURNAL show a saving of £37, notwithstanding that owing to the increase in the Membership and the sales of the JOURNAL during the year it was necessary to print 25,632 more copies than in the previous year. Paper has cost less by £178, the market going rather in favour of buyers. The postage for the despatching of the JOURNAL shows a small increase. This is influenced by the Membership, and by the weight of the foreign edition. The variation of the foreign postage by ½*d.* per week represents from £500 to £600 on the year.

(h) *Secret Remedies.*

It will be observed that in this account £937 is entered for the cost of producing the book "Secret Remedies."

The sale of the book has met with considerable success. By the end of 1909 over 42,000 copies had been printed and since sold, while a steady sale is still going on.

As a result of the publication of "Secret Remedies," after paying all expenses for printing, advertising, and publishing, there is a net profit of £271, while in addition the Association has a publication that is likely to secure a steady sale for some time to come. Under Sundries there is an increase of some £20 owing to the purchase of a Typewriter.

(i) *Revenue.*

In looking to the Revenue, it is gratifying to record an increased return of £537 from advertisements, notwithstanding the fact that many advertisements have been tendered for insertion in the JOURNAL and refused as being unsuitable or opposed to the principles laid down by the Association in the matter of advertisements that may properly be published in the JOURNAL.

Sundry sales for the Journals, binding covers, and reprints has been progressive.

The discounts on machining and paper are naturally less as expenditure decreases.

If the cost of producing the book "Secret Remedies," and the profits from the sales thereof, be alienated from the Journal Account, the total expenditure on the JOURNAL for the year has diminished, while the revenue has increased by £570. Thus the total cost to the Association for producing the BRITISH MEDICAL JOURNAL for the period under review as compared with the previous year is less by £580.

(j) *Capitation Grants to Branches.*

The amount of Capitation Grants distributed to Branches is less by £1,470. During the year 2*s.* as against 4*s.* was distributed to Home Branches, but Branches outside the United Kingdom received the full 4*s.* per head.

(k) *Subscription Losses.*

It has been found necessary to write off less by £36 than in the previous year. Although the provision for contingent loss may appear large, assuming that none of this money is ultimately recovered, the loss on subscriptions represents only a fraction over 3 per cent., which it is believed compares favourably with loss of subscriptions by other corporate bodies.

(l) *Depreciation.*

In the case of the Library, and Plant and Type, the same amount as in former years has been provided for depreciation.

With Furniture and Fittings, £200 has been written off. This is less than in the year 1908, but then it was considered prudent to write off a large amount having regard to the fact that the Association was taking possession of the new premises and some of the furniture could not be worked in.

At the present time, having regard to the contingent possibility of a claim for total loss by fire, it is considered that the furniture and fittings stand at a reasonable figure in your Assets.

(m) *Investments.*

The investments of the Association show a further shrinkage, an unfortunate experience that is general with all holders of gilt-edged securities.

(n) *General Summary.*

In conclusion it is gratifying to note that the Revenue of the Association shows the largest expansion during the last five years. At the same time expenditure has increased by £1,864.

British Medical Association.

Balance Sheet 31st December, 1909.

Dr. **Cr.**

LIABILITIES.

	£ s. d.	£ s. d.
To Subscriptions paid in advance	375 7 6	
,, Advertisements ditto	1,105 12 2	
,, Contributions	808 3 9	2,289 3 5
,, Scholarships	162 10 0	
,, Reporting	55 2 6	
,, Engraving	46 7 3	
,, Printing Journal	396 3 0	
,, Paper for Journal	766 13 1	
,, Miscellaneous Printing	1,128 19 6	
,, Stationery	158 1 0	
,, Repairs	51 5 9	
,, Legal Charges	195 9 2	
,, Rates and Taxes, Insurance and Electricity	441 0 4	
,, Plant and Type	39 2 8	
,, Editorial Expenses...	29 2 0	
,, Sundries	126 2 8	
,, Library Books, &c.	120 1 1	
,, New Premises	190 0 0	3,906 0 0
,, London County and Westminster Bank—Amount of Loan at December 31st, on Account of New Building, secured by Deposit of Deeds of Freehold Property		43,754 10 7
,, Subscriptions due to Branches, December 31st, 1909		252 8 8
TOTAL LIABILITIES		50,302 2 8
,, OFFICE STAFF SUPERANNUATION FUND—		
,, Amount Invested per contra		3,174 18 11
,, **Surplus Account—**		
Balance on January 1st, 1909	103,814 9 10	
Balance of Income over Expenditure for 1909 brought from Revenue Account	995 18 0	
	104,810 7 10	
Less Expenditure, &c., incurred in removing to New Premises	610 19 8	
Balance being total of Excess of Assets over Liabilities ...		**104,199 8 2**
		£157,676 9 9

ASSETS.

	£ s. d.	£ s. d.
By Subscriptions in arrears		2,358 19 0
,, Advertisements ,, ...		3,321 4 1
,, Sundry Sales ,, ...		931 3 2
,, Furniture and Fixtures		663 8 8
,, Library		2,032 12 8
,, Plant and Type		2,036 1 2
,, Stock of Paper in hand for printing Journal		304 9 9
,, Accrued Rent		262 3 10
,, Cash at Office		44 7 10
,, Cash at London County and Westminster Bank (being Branch Subscriptions in hand December 31st, 1909)		352 8 8
,, Cash at London County and Westminster Bank on Current Account		312 3 0
,, INVESTMENTS—		
,, Freehold Site, 429, Strand, Agar Street, and Harvey's Buildings, as at 31st December, 1909	86,020 0 0	
,, Less amount realised for Strip of Land sold	605 0 0	85,415 0 0
,, Amount Expended on New Building to December 31st, 1909		43,843 9 0
,, £3,200 Bank of England Stock @ 256		8,192 0 0
,, £6,400 Midland Railway 2½% Perpetual Guaranteed Preferential Stock @ 69¼		4,432 0 0
,, OFFICE STAFF SUPERANNUATION FUND—		
Investments as per Separate Account	3,161 12 6	
Cash at Bank	13 6 5	3,174 18 11
		£157,676 9 9

(The above Assets do not include the unexpended balances of Capitation Grants held by the various Branches.)

Revenue or Profit and Loss Account for the Year ending 31st December, 1909.

		1908. £ s. d.		1909. £ s. d.	
General Association Expenses	*Abstract A* ...	2,197 19 8		3,645 10 5
Central Meeting Expenses	" *B* ...	3,706 19 7		3,915 2 8
Central Premises Expenses	" *C* ...	1,524 6 9		1,783 15 1
Printing, Stationery and Postage Expenses ...	" *D* ...	1,161 13 6		1,257 15 1
Central Staff Expenses	" *E* ...	4,504 8 9		4,987 0 9
Library Account	" *F* ...	256 2 9		331 7 5
Journal Account Expenses	" *G* ...	33,155 19 6		34,082 5 1
Capitation Grants to Branches	... ...	3,750 14 6		2,279 2 8
Subscriptions Written off for Deaths, Arrears, &c.	... ...	912 11 4		876 13 5
		£51,170 16 4		£53,158 12 7
Library—Written off towards Depreciation ...	200 0 0		200 0 0	
Plant and Type—Ditto	500 0 0		500 0 0	
Furniture and Fittings—Ditto	500 0 0		200 0 0	
Investments—Ditto	384 0 0		560 0 0	
		1,584 0 0		1,460 0 0
		£52,754 16 4		£54,618 12 7
Balance of Income over Expenditure carried to Balance Sheet...		732 16 7		995 18 0
		£53,487 12 11		£55,614 10 7

		1908. £ s. d.	1909. £ s. d.
Subscriptions		26,717 1 7	26,810 14 2
Journal Account, Total Receipts	See *Abstract G* ...	26,258 7 4	28,036 2 4
Interest on Investments and Rent accrued		442 15 0	702 3 10
Returned Scientific Grants		69 9 0	65 10 3
		£53,487 12 11	£55,614 10 7

Abstract A.]

General Association Expenses.

	1908. £ s. d.	1909. £ s. d.
Auditors' Fee	105 0 0	105 0 0
Bank Charges and Interest on Loan	97 10 2	1,668 8 1
Legal Expenses	558 7 8	628 3 6
Research Scholarships	612 10 0	352 10 0
Scientific Grants	339 0 0	350 0 0
Office—Petty Cash	159 18 5	159 6 1
Supplementary Grant to Contract Practice Committee of South Wales and Monmouthshire Branch	150 0 0	—
Sundries	175 13 5	372 2 9
	£2,197 19 8	£3,645 10 5

Abstract B.]

Central Meetings Expenses.

	1908. £ s. d.	1908. £ s. d.	1909. £ s. d.	1909. £ s. d.
ANNUAL MEETING—Cost of *Daily Journal*	193 10 0		152 0 0	
" " Expenses of Sections	63 17 2	250 7 2	39 2 6	191 2 6
REPRESENTATIVE MEETINGS—				
Railway Fares	267 1 10		370 10 0	
Printing	519 18 0		347 9 5	
Sundries	—	786 19 10	24 4 2	742 3 7
COUNCIL—				
Railway Fares	591 9 10		631 6 8	
Printings	80 15 1		120 18 3	
Reporting	45 13 6	717 18 5	48 16 6	801 1 5
Railway Fares to Secretaries of Branches and Divisions		29 7 6		44 11 10
		1,794 12 11		1,778 19 4

Committees.

	1908. £ s. d.	1908. £ s. d.	1909. £ s. d.	1909. £ s. d.
Arrangements Committee—				
Railway Fares	40 12 0		24 1 6	
Miscellaneous Printings	11 4 0	51 16 0	5 13 0	29 14 6
Central Ethical Committee—				
Railway Fares	150 17 10		103 2 9	
Miscellaneous Printings	79 2 5		119 8 6	
Reporting	—	230 0 3	7 17 6	230 8 9
Chairmen of Committees—				
Railway Fares	—	—	—	8 6 0
Chloroform Committee—				
Railway Fares	—	8 13 8	—	—
Colonial Committee—				
Railway Fares	0 8 0		1 19 2	
Miscellaneous Printings	2 9 6	2 17 6	3 8 3	5 7 5
Election Returns Committee—				
Railway Fares	—	—	10 0 3	
Miscellaneous Printings	—	11 19 6	34 15 0	44 15 3
Hospitals Committee—				
Railway Fares	77 19 2		64 13 3	
Miscellaneous Printings	19 2 6	94 1 8	28 12 0	93 5 3
Irish Committee—				
Railway Fares	56 12 8		54 4 10	
Miscellaneous Printings	6 8 0	63 0 8	4 14 6	58 19 4
Carried forward		2,257 2 2		2,249 15 10

Committees—*continued.*

	1908. £ s. d.	1908. £ s. d.	1909. £ s. d.	1909. £ s. d.
Brought forward		2,257 2 2		2,249 15 10
Journal and Finance Committee—				
Railway Fares	74 18 1		120 14 5	
Miscellaneous Printings	39 11 0		39 0 9	
Reporting	31 10 0	145 19 1	22 1 0	181 16 2
Medico-Political Committee—				
Railway Fares	375 6 8		361 0 6	
Miscellaneous Printings	151 14 6	527 1 2	212 13 3	573 13 9
Naval and Military Committee—				
Railway Fares	12 17 3		11 5 1	
Miscellaneous Printings	6 5 6	19 2 9	5 3 6	16 8 7
Ophthalmia Neonatorum Committee—				
Railway Fares	—	2 17 6	23 0 3	
Miscellaneous Printings	—	—	29 3 3	52 3 6
Organisation Committee—				
Railway Fares	147 1 6		190 1 4	
Miscellaneous Printings	123 3 6	270 5 0	141 3 0	331 4 4
Permanent Assistant Medical Secretary Committee—				
Railway Fares	18 15 8			
Miscellaneous Printings	0 11 0	19 6 8		—
Poor Law Committee—				
Railway Fares	—		103 11 7	
Miscellaneous Printings	—	—	19 15 3	123 6 10
Premises Committee—				
Railway Fares	31 4 6		25 17 10	
Miscellaneous Printings	7 0 0	38 4 6	7 18 9	33 16 7
Public Health Committee—				
Railway Fares	56 10 6		83 12 2	
Miscellaneous Printings	15 4 6	71 15 0	15 16 3	99 8 5
Science Committee—				
Railway Fares	115 8 2		102 17 3	
Miscellaneous Printings	27 12 3	143 0 5	41 14 9	144 12 0
Scottish Committee—				
Railway Fares	21 2 8		32 5 9	
Miscellaneous Printings	2 5 6	23 8 2	3 13 6	35 19 3
Special Finance Inquiry Committee—				
Railway Fares	—	0 12 6	—	—
Spiritual Healing Sub Committee—				
Railway Fares	—	—	—	4 3 0
Territorial Forces Committee—				
Railway Fares	—	—	4 11 8	
Miscellaneous Printings	—	—	1 4 9	5 16 5
Therapeutic Committee—				
Railway Fares	—	23 13 1	—	20 18 6
Uterine Cancer Committee—				
Railway Fares	17 17 9		1 13 0	
Miscellaneous Printings	5 19 0	23 16 9	4 16 6	6 9 6
United Kingdom Hospital Conference—				
Railway Fares	21 16 4		—	
Miscellaneous Printings	43 18 6	65 14 10	—	—
Paper for Miscellaneous Printing in connection with Committees	—	75 0 0		35 10 0
		£3,706 19 7		£3,915 2 8

Abstract C.]

Central Premises Expenses.

	1908. £ s. d.	1909. £ s. d.
Cleaning Offices	208 0 0	314 6 11
Coals, Coke and Wood	51 9 3	106 7 3
General Repairs and Upkeep	25 3 9	60 9 9
Rates and Taxes, Insurance, Electricity, and Rent	1,239 13 9	1,302 11 2
	£1,524 6 9	£1,783 15 1

Abstract D.]

Central Printing, Stationery and Postage Expenses.

	1908.	1909.
General Printing	199 0 0	185 10 0
Office—General Postage :—		
Financial Secretary and Business Manager's Department	399 13 6	393 8 2
Medical Secretary's Department	103 18 11	142 15 9
Stationery	459 1 1	533 1 2
	£1,161 13 6	£1,257 15 1

Abstract E.]

Central Staff Expenses.

	1908 £ s. d.	1908 £ s. d.	1909. £ s. d.	1909. £ s. d.
Financial Secretary and Business Manager	800 0 0		900 0 0	
Assistant Secretary	325 0 0		350 0 0	
Clerical Staff, General Office, Journal, Subscription and Advertisement Departments	2,749 1 10		2,723 10 9	
		3,874 1 10		3,973 10 9
Less Proportion of Salaries debited to Journal Account		1,979 2 0		1,996 2 6
		1,894 19 10		1,982 8 3
Medical Secretary	750 0 0		900 0 0	
Deputy Medical Secretary	125 0 0		500 0 0	
Assistant Medical Secretary	250 0 0		262 10 0	
Clerical Staff (Medical Secretary's Department)	672 8 0		797 18 0	
		1,797 8 0		2,430 8 0
Donation to Charing Cross Hospital		10 10 0		10 10 0
Pension—Late General Secretary and Manager		300 0 0		—
TRAVELLING EXPENSES :—				
Financial Secretary and Business Manager's Department		73 3 2		89 16 3
Medical Secretary's Department		128 7 9		143 18 3
Amount Voted to Office Staff Superannuation Fund		300 0 0		300 0 0
		£4,504 8 9		£4,987 0 9

Abstract F.]

Library Account.

1909.		£ s. d.
Jan. 1.	To Balance	2,097 18 7
Dec. 31.	,, Purchase of Books	104 11 0
	,, Binding Books	30 3 1
	,, Librarian's Salary	250 0 0
	,, Librarian's Clerk's Salary	58 15 0
	,, Printing and Postage of Circulars, &c.	22 12 5
		£2,564 0 1

1909.		£ s. d.	£ s. d.
Dec. 31.	By Librarian's Salary	250 0 0	
	,, Librarian's Clerk's Salary	58 15 0	
	,, Printing and Posting of Circulars, &c.	22 1	
			331 7 5
	Amount written off for Depreciation		200 0 0
	Balance carried to Balance Sheet		2,032 12 8
			£2,564 0 1

Abstract G]

JOURNAL ACCOUNT.

Income and Expenditure Account for the year ending 31st December, 1909.

	1908. £ s. d.	1909. £ s. d.
EDITORIAL.		
Salaries—Editor	1,000 0 0	1,000 0 0
,, Assistant Editor	750 0 0	750 0 0
,, Sub-Editor	300 0 0	400 0 0
,, Clerical Staff	461 12 6	481 12 0
Contributions and Reporting	3 430 19 1	3,307 5 4
Engraving	242 13 9	254 2 8
Legal Expenses	14 1 2	100 10 6
Postage	72 10 0	77 6 8
Analyses	218 3 3	149 2 0
Travelling Expenses, Papers, &c.	151 0 3	178 15 7
Advance Slips circulated to the Press	31 4 9	28 8 9
	6,675 4 9	6,727 3 6
MANAGERIAL.		
JOURNAL—Compositors' Wages, Machining, &c.	8 492 4 0	8,455 12 6
,, Paper	8,666 5 4	8,488 18 1
SUPPLEMENT—Compositors' Wages, Machining, &c.	992 7 0	989 5 0
,, Paper	976 5 0	981 11 0
Postage for dispatch of JOURNAL	4,454 1 0	4,476 12 9
Address Bands for Issuing JOURNAL	467 4 9	461 5 9
Proportion of Manager's and Clerks' Salaries	1,979 2 0	1,996 2 6
General Postage	112 10 0	144 10 0
General Printing	30 9 9	46 14 1
Reprints	148 15 2	168 2 9
Secret Remedies	—	937 5 9
Stationery (Ledgers, Letter Books, &c.)	112 0 0	137 0 0
Travelling Expenses	19 10 9	22 1 5
Compositors' Sick Fund	10 10 0	10 10 0
Sundries	19 10 0	39 10 0
	£33 155 19 6	£34,082 5 1

	1908. £ s. d.	1909. £ s. d.
Advertisements	22,448 3 8	22,985 1 5
Sundry Sales—Journals	2,428 1 8	2,474 18 10
,, Reading and Binding Covers, &c.	80 5 1	95 3 8
,, Reprints	231 17 2	267 18 8
,, Secret Remedies	—	1,268 19 10
Sale of Waste, &c.	39 2 4	29 11 0
Discounts on Machining, Paper, &c.	1,030 17 5	974 8 11
	26,258 7 4	28,036 2 4
Balance from Subscriptions for the cost of production and issue of the Journal	6,897 12 2	6,046 2 9
	£33,155 19 6	£34,082 5 1

New Premises Account.

1909.		£ s. d.
Jan. 1.	To Balance	38,586 3 8
Dec. 31.	,, Fees to Mr. Percy Adams (architect)	200 0 0
	,, Clerk of Work's Salary	91 0 0
	,, Messrs. Prestige & Co. (Builders)	4,000 0 0
	,, ,, Shoolbred (Council Seats)	496 9 0
	,, Blinds and Curtains, &c.	249 8 1
	,, Electric Fittings	10 8 3
	,, Completion of Ground Floor Premises	190 0 0
		£43,843 9 0

1909.		£ s. d.
Dec. 31.	By Balance	43,843 9 0
		£43,843 9 0

Stewart Fund.

£579 4 per cent. Caledonian Railway Debenture Stock.

1909.		£ s. d.
Jan. 1.	To Balance brought over from 1908	28 13 0
Dec. 31.	,, Interest	21 17
		£50 10 8

1909.		£ s. d.
Dec. 31.	By Cash at Bank	50 10 8
		£50 10 8

Middlemore Fund.

£666 13s. 4d. 3 per cent. North British Railway Debenture Stock.

1909.		£. s. d.
Jan. 1.	To Balance brought over from 1908	44 3 11
Dec. 31.	" Interest	18 18 0
		£63 1 11

1909.		£ s. d.
Dec. 31.	By Cash at Bank	63 1 11
		£63 1 11

Francis Fowke Bequest.

£700 Midland Railway 2½% Perpetual Guaranteed Preferential Stock.

1909.		£ s. d.
Dec. 31.	To Interest	14 7 9

1909.		£ s. d.
Dec. 31st.	By Cash at Bank	14 7 9

Office Staff Superannuation Fund.

Dr.

1909.		£ s. d.	£ s. d.
Jan. 1.	To Balance brought over from 1908	2,726 5 10	
Dec. 31.	" Less amount written off Investment	51 16 11	
			2,674 8 11
	" Payments by Members of Staff		107 9 8
	" Vote from General Funds		300 0 0
	" Interest on Investments		93 0 4
			£3,174 18 11

Cr.

1909.		£ s. d.
Dec. 31.	By Balance carried down—	
	" Cash at Bank	13 6 5
	INVESTMENTS—	
	" £600 Cape of Good Hope 3 per cent. Stock @ 85	513 0 0
	" £100 Bristol Corporation 3½ per cent. Redeemable Stock, bought 1906	100 0 0
	" £650 Midland Railway 2½ per cent. Consolidated Perpetual Guaranteed Stock @ 69¼	450 2 6
	" £200 New Zealand 4 per cent. 1929 Stock @ 105...	210 0 0
	" £400 New Zealand 3 per cent. Stock @ 85⅝	341 0 0
	" £200 Furness Railway Consolidated 4 per cent. Preferential Stock @ 92	184 0 0
	" £250 Bank of England Stock @ 256	640 0 0
	" £400 India Stock 3 per cent. @ 84½	338 0 0
	" £450 Stockton-on-Tees Corporation 3 per cent. Redeemable Stock	382 10 0
		£3,174 18 11

Having examined the Balance Sheet, dated 31st December, 1909, and Accounts with the books and vouchers of the Association, and having received all the information and explanations we have required, we report that the Balance Sheet is, in our opinion, properly drawn up so as to exhibit a true and correct view of the state of the affairs of the Association according to the best of our information and the explanations given to us and as shown by the books of the Association.

We have verified the Investments of the Association on General Account and on account of the Trust Funds shown and of the Office Staff Superannuation Fund, and we have verified the possession by the Bankers of the Association of the Deeds of the Freehold Property.

EDWIN RAYNER,
Honorary Treasurer.

GUY ELLISTON,
Financial Secretary and Business Manager.

PRICE, WATERHOUSE, & CO.,
3, Frederick's Place, Old Jewry, E.C.,
19th April, 1910.

Briefly summarised 1908 compared with the previous year shows £995 carried to reserve. Revenue increased by £2,127, and Expenditure by £1,864. In comparison, however, there were four items of expenditure in the year 1908 totalling £912, which did not occur in the year 1909.

The Revenue has for many years responded in a remarkable manner to the heavy demands made upon it, but the ratio has reached a point that must again be a cause of some anxiety.

ESTIMATE OF RECEIPTS AND EXPENDITURE FOR 1910.

7. In submitting Estimate of Receipts and Expenditure for the current year, it is calculated that, after all expenses are paid, there may be a surplus of £300.

EXPENDITURE.

	£
General Association Expenses	3,650
Central Meeting Expenses	4,500
Central Premises Expenses...	1,850
Central Printing, Stationery, and Postages	1,500
Central Staff Expenses	5,000
Library	600
JOURNAL Account	34,300
Capitation Grants to Branches	2,300
Arrears of Subscriptions	900
Depreciation of Furniture, Plant, and Type	1,000
	55,600
ESTIMATED SURPLUS...	300
	£55,900

RECEIPTS.

	£
Subscriptions	27,000
Advertisements	23,000
Sundry Sales of Journals, etc.	2,800
Investments	2,100
Discounts on Purchases of Paper...	1,000
	£55,900

APPORTIONMENT OF MEMBERS' SUBSCRIPTIONS.

8. The following table shows how the subscription of 25*s.* has been apportioned for defraying the expenses of the Association for the year ending December 31st, 1909. Details of expenditure under each head are given in the various schedules of the Financial Statement for the year :—

	£	£	*s.*	*d.*
General Association Expenses ...	3,645	0	3	4
Central Meeting Expenses ...	3,915	0	3	8
Central Premises	1,783	0	1	7
Printing, Stationery, and Postage...	1,257	0	1	2
Library	331	0	0	3
Central Staff Expenses	4,987	0	4	7
Journal and Supplement, Advertisements, &c.	6,046	0	5	6
Written off Subscriptions	876	0	0	9
Written off for depreciation of Investments, Plant, and Type ...	1,460	0	1	3
Balance carried to surplus	995	0	0	9
Capitation Grants	2,279	0	2	2
		£1	5	0

ISSUE OF SUPPLEMENT TO NON-MEMBERS.

9. In accordance with the instruction contained in Resolution 20 of the Belfast Representative Meeting, the Council reports that it is impracticable to withhold the Supplement of the JOURNAL from Non-Members. The Supplement was established, in 1905, so that Members might more conveniently find the account of Association business. After an experimental period—the issue was occasional, as matter offered—it was deemed essential to make it weekly. This is made possible only by transferring certain matters from the body of the JOURNAL. If the Supplement is to be issued to Members only, certain matters would have again to go into the body of the JOURNAL, and the weekly issue of the Supplement would be impracticable. There would be no monetary saving, and it is doubtful whether the Post Office might not take exception to the issue of a Supplement which was not an essential part of the JOURNAL. It is also believed to be in the interest of the Association that its proceedings should as a rule be accessible to the public. Matters which it is thought advisable to issue to Members only are issued in bulk to the Secretaries of Divisions, and are by them included with the summons to the next Division meeting. This procedure is economical, more secure than would be its issue with the JOURNAL, and more likely to arrest the attention of the individual Members.

CONTROL OF ADVERTISEMENTS IN JOURNAL.

10. At Belfast the following motion of the Birmingham Central Division was referred to the Council for consideration and Report :—

> That the Council instruct the Journal and Finance Committee to appoint annually a Sub-Committee for the revision of advertisements ; and that no advertisement be accepted for publication in the BRITISH MEDICAL JOURNAL until it has been approved by the Sub-Committee ; and the Sub-Committee shall not allow any advertisement to appear which contains misleading or exaggerated statements, nor any advertisement of any preparation or appliance which is advertised elsewhere than in the medical press as a remedy for any morbid condition, and is of such a character that its use demands medical supervision in the interests of the patient, or which is anywhere advertised in misleading or exaggerated terms. (Minute 31.)

11. The Council has given the matter careful consideration. Advertisements being received right up to the time of the JOURNAL going to press, it is of primary importance for the issue of the JOURNAL that the decision as to the admission should be prompt. The control is at present in the hands of the Financial Secretary and Business Manager, and, in accordance with a Resolution of the Representative Meeting at Sheffield, all advertisements of professional import are submitted to the Medical Secretary, and in cases of doubt the Chairman of the Ethical or other Committee concerned is consulted. If necessary, the Committee concerned is consulted. In practice, advertisements such as are referred to in the Resolution of the Birmingham Central Division are not sought, and if tendered they are refused.

12. The Council believes that it is impracticable for a special Sub-Committee to control advertisements, and is of the opinion that the present executive can perform the duty. The Council is always prepared to take into consideration information as to advertisements which may be considered undesirable.

13. The details of the executive administration of this work have also received consideration.

DUTIES OF THE SECRETARIAT.

14. In accordance with the following instruction of the Annual Representative Meeting at Belfast :—

> *Minute* 56.—That it be referred to the Council to define the duties of this office—that is, the office of Financial Secretary and Business Manager, referred to in the previous resolution of the Meeting—and of that of Medical Secretary, in accordance with the principles set forth in Minute 544 of the Annual Representative Meeting of July, 1908 :

the Council has defined in detail the duties of the Financial Secretary and Business Manager, and the Medical Secretary, in so far as these had not been already determined by decisions of the Representative Meeting and of the Council.

RE ACCIDENT POLICY IN CONNECTION WITH THE BRITISH MEDICAL JOURNAL.

15. Arising out of Minute 33 of the Annual Representative Meeting at Belfast,

> (33) Resolved (61 to 39) : That the Council take into consideration the advisability of adding an Accident Policy in connection with the BRITISH MEDICAL JOURNAL :

the Council reports to the Representative Meeting that it has been advised under the present Memorandum of Association that the Establishment of a Sickness and Accident insurance policy in connection with the BRITISH MEDICAL JOURNAL is legally impracticable upon any footing which would involve the Association in pecuniary liability. Further, that in the opinion of the Council it would lower the prestige of the BRITISH MEDICAL JOURNAL and be otherwise inexpedient to institute such a policy even if there were no legal obstacle. The Council also desires to report to the Annual Representative Meeting that the Medical Insurance Committee is in a position to offer to individual Members on

exceptionally favourable terms insurance not only against sickness and accident, but against every form of risk.

16. The Council has ascertained that there is no obstacle to Representatives upon the Medical Insurance Committee being nominated by the Association at the request of such Committee, and the Council has already received a request from that Committee to so nominate.

17. The Council, in arriving at its conclusions as to the inexpediency of issuing a Sickness and Accident Policy in connection with the BRITISH MEDICAL JOURNAL, was influenced by the fact that in its opinion the prestige of the BRITISH MEDICAL JOURNAL would thereby suffer. The conditions of insurances at present offered in connection with journals were carefully studied, and it was found that they were so limited by restrictions that the Council considered that any protection it could offer in this way would not afford the protection desired by Members of the Association. Under a comprehensive Sickness and Accident Policy on any terms not supported by actuarial figures, the protection would be so limited as to be illusory and might create a false sense of security. For the information of the Representative Meeting the actuarial figures of the Medical Sickness Society are appended; this Society is worked on exceedingly economical lines.

Medical Sickness, Annuity and Life Assurance Society.

Sickness or Accident Pay.

18. The following are the rates, according to the age at entry up to 49, as approved by the Consulting Actuary. The premiums are payable annually or half-yearly (in advance).

Of £4 4*s.* per Week.

TABLE A.—Premium payable to secure £4 4*s.* per week during incapacity, whether caused by *Sickness or Accident.* The full amount of Sick Pay is payable for the first six months of protracted illness, and one half the full Sick Pay for the remainder of the same attack (Rule XII). All Sick Pay and Premiums cease at age 65.

Age last Birthday.	Annual.	Half-yearly.	Age last Birthday.	Annual.	Half-yearly
	£ s. d.	£ s. d.		£ s. d.	£ s. d.
21	5 17 10	3 0 6	36	8 4 8	4 4 6
22	5 19 9	3 1 6	37	8 8 6	4 6 6
23	6 2 7	3 2 11	38	8 13 2	4 8 10
24	6 4 10	3 4 0	39	8 17 11	4 11 4
25	6 7 0	3 5 2	40	9 2 5	4 13 8
26	6 9 6	3 6 6	41	9 7 6	4 16 3
27	6 12 4	3 8 0	42	9 12 6	4 18 10
28	6 15 6	3 9 7	43	9 18 6	5 1 11
29	6 19 0	3 11 4	44	10 3 11	5 4 8
30	7 2 6	3 13 2	45	10 10 4	5 7 11
31	7 5 0	3 14 6	46	10 16 11	5 11 4
32	7 9 2	3 16 6	47	11 3 7	5 14 9
33	7 12 4	3 18 2	48	11 11 2	5 18 8
34	7 15 10	4 0 0	49	11 18 2	6 2 2
35	7 19 11	4 2 1			

Of £3 3*s.* per Week.

TABLE B.—Premium payable to secure £3 3*s.* per week during incapacity, whether caused by *Sickness or Accident.* The full amount of Sick Pay is payable for the first six months of protracted illness, and one half the full Sick Pay for the remainder of the same attack (Rule XII). All Sick Pay and Premiums cease at age 65.

Age last Birthday.	Annual.	Half-yearly.	Age last Birthday.	Annual.	Half-yearly.
	£ s. d.	£ s. d.		£ s. d.	£ s. d.
21	4 8 5	2 5 4	36	6 3 6	3 3 5
22	4 9 8	2 6 1	37	6 6 4	3 4 10
23	4 11 10	2 7 2	38	6 9 10	3 6 8
24	4 13 5	2 8 0	39	6 13 4	3 8 5
25	4 15 8	2 9 1	40	6 16 10	3 10 4
26	4 17 6	2 10 1	41	7 0 7	3 12 2
27	4 19 5	2 11 1	42	7 4 9	3 14 4
28	5 1 7	2 12 2	43	7 9 2	3 16 7
29	5 4 2	2 13 6	44	7 13 4	3 18 8
30	5 6 5	2 14 8	45	7 17 8	4 1 0
31	5 9 0	2 15 11	46	8 2 10	4 3 7
32	5 11 10	2 17 5	47	8 7 7	4 6 0
33	5 14 0	2 18 6	48	8 13 7	4 9 1
34	5 16 11	3 0 0	49	8 18 8	4 11 8
35	6 0 0	3 1 8			

Of £2 2*s.* per Week.

TABLE C.—Premium payable to secure £2 2*s.* per week during incapacity, whether caused by *Sickness or Accident.* The full amount of Sick Pay is payable for the first six months of protracted illness, and one half the full Sick Pay for the remainder of the same attack (Rule XII). All Sick Pay and Premiums cease at age 65.

Age last Birthday.	Annual.	Half-yearly.	Age last Birthday.	Annual.	Half-yearly.
	£ s. d.	£ s. d.		£ s. d.	£ s. d.
21	2 18 11	1 10 3	36	4 2 4	2 2 3
22	2 19 11	1 10 9	37	4 4 3	2 3 3
23	3 1 4	1 11 6	38	4 6 7	2 4 5
24	3 2 5	1 12 0	39	4 9 0	2 5 8
25	3 3 6	1 12 7	40	4 11 3	2 6 10
26	3 4 9	1 13 3	41	4 13 9	2 8 2
27	3 6 2	1 14 0	42	4 16 3	2 9 5
28	3 7 9	1 14 10	43	4 19 3	2 11 0
29	3 9 6	1 15 8	44	5 2 0	2 12 4
30	3 11 3	1 16 7	45	5 5 2	2 14 6
31	3 12 6	1 17 3	46	5 8 6	2 15 8
32	3 14 7	1 18 3	47	5 11 10	2 17 5
33	3 16 2	1 19 1	48	5 15 7	2 19 4
34	3 17 11	2 0 0	49	5 19 1	3 1 1
35	4 0 0	2 1 1			

19. The amounts paid by the Sickness and Accident Fund during the six years, 1903–1908, were as follows:—

Year	No. of Members.	£
1903	2,274	9,663
1904	2,336	10,566
1905	2,429	11,132
1906	2,488	11,493
1907	2,583	12,700
1908	2,723	14,447

20. During the year 1908, with a membership of 2,723, the total number of sickness and accident claims was 726, as against 668, with a membership of 2,583 in the preceding year. Of these, 653 were sickness claims, and 73 arose from accidents of various kinds. Among the accidents, 14 were met with in bicycling, 16 in riding or driving, 7 in motoring, and 18 were poisoned wounds. The average duration of sickness was 6 weeks, 4 days; 32 members were in benefit during the whole year.

Resolutions of Representative Meeting involving Special Expenditure.

21. The instruction, contained in Minute 59 of the Annual Representative Meeting at Belfast, that the Council, before reporting to the Representative Meeting upon any Motion on the Agenda of the Meeting which involves special expenditure, should consult the Branch or Division concerned, has been noted for future guidance.

MEDICAL BENEVOLENCE.

22. During the past year £587 have been collected through the Central Office on behalf of the British Medical Benevolent Fund, £450 on behalf of the Epsom College Benevolent Fund, and £30 on behalf of the Royal Medical Benevolent Fund Society of Ireland.

The Council earnestly pleads for more generous support of these valuable Institutions.

THE BRITISH MEDICAL JOURNAL.

23. The Council believes that the BRITISH MEDICAL JOURNAL continued during 1909 to discharge in an increasingly satisfactory way one of its chief functions, which is the dissemination of trustworthy information as to the advance of clinical medicine, surgery, and obstetrics, and of the pathological and bacteriological investigations to which that advance is in a large measure due. The extension of the more refined methods of clinical research to everyday clinical practice is one of the most marked features of the present development of medical science. Among such extensions one of the most striking is the increasing reliance placed upon serum reactions in the diagnosis of disease. A recent instance is afforded by the serum reaction in syphilis, which has been found of great practical value in the recognition of the late as well as of the early manifestations of

that disease. Numerous improvements and simplifications of the technique have been introduced, and the subject has therefore made considerable demands on space. A great deal of work is also being done to elucidate the pathology and to assist in the early diagnosis of cancer. As a result of this, a number of communications on that subject were published, including an important analytical paper by the President-Elect. A plate was also published of coloured illustrations, showing that some conditions of the tongue, previously regarded as pre-cancerous, are in reality true cancer in an early stage, an observation the practical importance of which in relation to treatment need not be insisted on. A very large number of papers founded on clinical experience gained in general practice, including records of individual cases, valuable on account of their rarity, or owing to the favourable effects of the treatment adopted, were published either in the reports of the scientific proceedings of Branches and Divisions or as separate communications. The Council believes that in this way many observations which would otherwise be lost are preserved and made useful to the Profession. In dealing with the scientific proceedings of the Annual Meeting, the plan adopted some years ago was continued, and the arrangements for their preparation and printing were so made that the publication of ordinary original articles was not interrupted. The printing of these proceedings was completed a fortnight earlier than in any of the preceding eight years, despite the fact that the number of Sections was slightly above the average.

24. The progress of Medicine abroad is reflected in the Epitome of Current Medical Literature, in the reviews of foreign books, an increasing number of which are received year by year, owing doubtless to the high reputation of the JOURNAL as one of the most important and widely circulated medical periodicals of the world, and in the letters of special correspondents in the various foreign centres of medical activity.

25. The JOURNAL has the no less important function in the corporate life of the Association of disseminating information as to the social, political, and economic questions which interest the Profession, and this function is discharged by the publication of Government and Parliamentary Reports in full or in abstract, and of reports of committees of the Association itself, mainly in the weekly Supplement, of editorial articles founded on information specially collected, of which those on psychical healing and on proprietary remedies and foods may be quoted as examples, and of correspondence indicating the opinions of members on medical questions of the day.

26. The publication early in the year of the Report of the Royal Commission on the Poor Laws and Relief of Distress, appointed in 1905, necessitated the devotion of a great deal of space to the elucidation and discussion of the many important questions affecting the medical profession raised by the recommendations of the majority and minority Reports of the Commission. An analysis of the Report was published within a few days of its issue, and subsequently similar analyses were published of the volumes issued later by the Commission as appendices to its Report. In addition many papers and addresses as well as numerous editorial articles appeared, and a lively correspondence arose. In this way the divers opinions of members of the Association engaged in various departments of practice, and therefore regarding the questions raised from different points of view, have been placed before the Association, and the JOURNAL has thus been able not only to arouse the interest of Members in a matter of first-rate importance, affecting both the social and scientific interests of the Profession, but has been able also to do something towards the elucidation of the problems involved.

27. In connexion with a review of the two volumes containing Lord Lister's collected Papers, a photographic portrait taken in Edinburgh in 1856 was published as a special plate. It is believed that this representation of the founder of modern surgery at the beginning of his career has been valued by members as a pendant to the reproduction of Mr. Rivière's portrait painted in 1902, when, honoured by his Sovereign, by the Profession of Medicine, and by men of science throughout the world, Lord Lister had withdrawn from active work. The Council is glad to know that in his retirement Lord Lister retains his active interest in science, and in the welfare of the Profession, the efficiency of which he has done so much to advance.

ORGANISATION.

MEMBERSHIP OF THE ASSOCIATION.

28. The total Membership of the Association on December 31st, 1909, was 21,405, being an increase of 242 over the previous year, as compared with an increase of 39 during the year 1908.

29. From the table given below it will be seen that this greater increase of membership is due both to an increase in the number of new Members and to a decrease in resignations and deaths.

Variations in Membership, 1908–9.

1908.			1909.		
New Members		1,023	New Members		1,148
Resignations	584		Resignations	496	
Deaths	244		Deaths	218	
Arrears	153		Arrears	190	
Expulsions	3		Expulsions	1	
	---	984	Removed from Medical Register	1	
				---	906
Increase ...		39	Increase ...		242

OBITUARY.

30.

Name.	Offices held in the Association, if any.
Dr. Rayner W. Batten ...	Formerly a Representative of Gloucestershire Branch on Central Council for several years.
Lieut.-Col. John Peter Hamilton Boileau	A member of the old Committee of Council.
Dr. Thomas Bridgwater ...	A Vice-President of the Association and formerly President of the Council.
Dr. Ernest Herbert Cobb ...	Honorary Secretary and Treasurer of the Bedford and Herts Division.
Mr. Edward Chas. Cripps ...	Ex-President of the Gloucestershire Branch.
Dr. H. Radcliffe Crocker ...	A Vice-President, Treasurer of the Association, 1906–08, and for many years Representative of the Metropolitan Counties Branch on the Central Council.
Dr. William Arthur Foxwell	Vice-President of Section of Medicine at Belfast, 1909.
Prof. Alexander Fraser ...	President of Section of Ophthalmology at Toronto, 1906.
Mr. Thomas Evan Jones ...	President of the North Wales Branch, 1874.
Dr. W. Kennedy	Ex-President, Northern Counties of Scotland Branch.
Sir Stephen Mackenzie ...	President of the Metropolitan Counties Branch, 1902.
Mr. Henry John Manning...	Honorary Secretary and Treasurer of the Southern Branch and Representative on Central Council for many years.
Dr. Harrison Mitchell ...	Ex-President of the Border Counties Branch, Representative of English Division in Representative Meetings, 1906–8.
Dr. Samuel Holgate Owen...	Formerly Chairman of the Manchester West Division.
Mr. Henry K. Ramsden ...	Representative of Chelsea Division in Representative Meetings, 1908–9.
Dr. W. B. Ransom	Member of Local Committee, Nottingham Meeting, 1892.
Dr. T. Whitehead Reid ...	Member of Central Council and Chairman of Hospitals Committee.
Dr. John Milson Rhodes ...	Chairman, South Manchester Division.

Name.	Office held in the Association, if any.
Dr. W. G. Rockwood ...	Formerly President of the Ceylon Branch.
Dr. Ernest Alfred Snape ...	Formerly a member of the Metropolitan Counties Branch Council.
Sir Wm. Thomson, C.B. ...	Formerly a member of the Central Council.

31. Dr. Samuel Alexander; Dr. John Edward Allen; Dr. Stanley Bean Atkinson; Dr. Hugh Arthur; Mr. Robert James Bedford; Dr. Hubert Elwyn Biss; Dr. James Bisshopp; Brigade-Surgeon Edward Joseph Boulton; Dr. Percy Boulton; Dr. Christian Wm. Branch; Mr. William Browne; Dr. W. B. Cheadle; Dr. Edward Clapton; Dr. James Clark; Dr. Thomas Kilner Clarke; Dr. William Clibbon; Dr. John Cockton; Mr. H. H. Clutton; Dr. William Joseph Collins; Dr. J. Constable; Dr. James Allan Coutts; Dr. Alex. Craig; Prof. D. J. Cunningham, F.R.S.; Col. George McBride Davis, C.B.; Dr. Andrew James Duncan; Mr. Samuel Evans; Dr. Wm. Ferris; Dr. O. H. Garland; Mr. George Sidney Gent; Dr. Thomas Graham; Mr. Robert Marcus Gunn; Surg.-Major Thomas Egerton Hale, V.C.; Dr. F. J. Vincent Hall; Mr. William Ilbert Hancock; Mr. Herbert L. Hawksley; Dr. Thomas Crawford Hayes; Col. Frederick William Lloyd Hodder; Dr. J. F. Hopgood; Dr. William Hunter (Hong Kong); Mr. Charles Robert Bell Keetley; Dr. George Skene Keith; Dr. Charles Kennedy; Mr. Arthur Kingsland; Mr. Henry Augustus Wellesley Lawson; Dr. George Stretton Leeds; Dr. Augustin A. Le Rossignol; Lieut.-Col. Alexander Long, R.A.M.C.; Dr. O. S. MacDonald; Dr. James Herbert McRee; Dr. John Campbell Mackenzie; Dr. T. McIlvoy; Lieut.-Col. Henry James McLaughlin; Dr. George Archibald Maconachie; Mr. Edward Marsh; Dr. W. Page May; Dr. Thomas Spence Meighan; Mr. Philip Edward Muskett; Mr. F. H. Pitts-Tucker; Mr. Robert Podmore; Mr. Herbert Murray Ramsay; Dr. Cecil Arthur Reynolds; Dr. John Ellison Richards; Dr. Henry Roscoe; Dr. John Latham Rushton; Dr. James Rutherford; Dep. Inspector-General Thomas Seccombe; Dr. Wm. Skinner; Dr. Robert Spence; Dr. Henry Stilwell; Dr. Hackworth Stuart; Dr. Charles Bell Taylor; Dr. George Padgett Taylor; Dr. John William Taylor; Dr. Evan Thomas; Dr. William Donald Urquhart; Dr. John Waggett; Mr. William Warwick Wagstaffe; Mr. Archibald Weir; Dr. J. H. Williams; Mr. Alfred Edward Wilmot; Dr. George Morton Wilson; Mr. Alfred John Wright; Dr. E. Adam Howie Wylie.

ANNUAL REPORTS.

32. The Annual Reports of Divisions and Branches afford gratifying evidence of the increasing consolidation of the organisation of the Association under the Constitution of 1902, and of the much greater interest taken not only by Members but also by non-members in the work of the Association.

33. A considerable awakening of interest has been caused during the year under review by the action of Local Authorities in the matter of Medical Inspection and Treatment of School Children, and by the publication of the Reports of the Royal Commission on the Poor Law. As a result Members of the Association and other members of the Profession are being constrained to recognise the vital importance to their own interests of an effective organisation of the Profession, and the fact that such an organisation can be obtained only through the British Medical Association.

SOUTH AFRICAN COMMITTEE.

34. The Council has pleasure in reporting that the Constitution of a South African Committee, desired by the South African Branches, has at length been effected. The Council has conferred upon the Committee the widest powers which the present Regulations of the Association permit, and has indicated the intention of further extending these powers so soon as this becomes practicable through the grant of a Charter, or through the action which the Annual Representative Meeting at Belfast determined (Minute 216) should be taken in the event of the Charter not being obtained.

35. The Council is assured that the Annual Representative Meeting will concur in desiring the greatest prosperity for the South African Committee, and for the South African Branches under its guidance.

ANALYSIS OF BRANCH REPORTS.

36. A tabular analysis of the Annual Reports of the Branches will be found on pages 13–21.

CAPITATION GRANTS.

Working of New System.

37. The accounts of the Branches for the year 1909 show the result of the first year's working of the new system of award of Capitation Grants, which resulted from an alteration of the By-laws by the Annual Representative Meeting at Sheffield, whereby a discretion was conferred upon the Council as to the amount of the Grant (being not more than 4*s.* per head) that should be awarded to each Branch. Grants not exceeding 2*s.* per head were made by the Council during the year, with an intimation to each Branch that additional Grants would be made if required by any Branch for the purpose of carrying on its work. No applications for increased Grants were made during the year 1909. Two applications have been received subsequently, and are under consideration. On the evidence at present before it, the Council is satisfied that there has been no interference with the efficiency of the work of the Branches through the adoption of the new system, and that there is a considerable saving for the time being to the funds of the Association.

Proposal to make Grants direct to Divisions.

38. Concerning the following Motion, submitted by a Division to the Annual Representative Meeting and referred by the Meeting (Minute 195) to the Council for consideration:—

> 194. That in view of the facts (1) that the policy of the Association is to consider the Division as the primary unit, each Division being free to govern itself in such manner as it shall think fit; (2) that the decision as to what additional subjects shall be forwarded to the Divisions for consideration rests with the Representative Body and the Central Council, and not the Branch Councils; this Representative Body considers that it is illogical any longer to place in the hands of Branch Councils the funds for distribution to the Divisions, while at the same time depriving them of any control over the objects for which the money is used, and instructs the Central Council to so amend the By-laws as to place the distribution in the hands of the Central Council, which can make Capitation Grants to all Divisions and Branch Councils as may be required.

Recommendation.

The Council recommends:

> That it is inadvisable to adopt the policy referred for the consideration of the Council under the Minutes above mentioned.

ELECTION OF REPRESENTATIVES.

Grouping for 1910–11.

39. With slight exception, due to the development of the Association, the Divisions have been grouped for the election of Representatives for the year 1910–11 as for the year 1909–10.

Proposed New Basis of Election.

40. The Council has considered the following instruction of the Annual Representative Meeting:—

> *Minute* 278.—That it be referred to the Council to consider the advisability of bringing before the next Representative Meeting such Amendments of the By-laws as are necessary to give effect to the following motions:—
>
> *Election of Representatives.*
>
> That in By-law 25 (1)* the words "each such Constituency being entitled to elect one Representative," be deleted;
>
> That in By-law 25 (2),* for the first word of line 2, "one" substitute "a," and after the word "Constituency" insert the words "to elect one Member"; at the end add the words "Any Division having more than 50 Members may elect

* The numbers refer to paragraphs of By-law 25 under the Draft Charter, which were as follows:—

REPRESENTATIVE BODY.

Formation of Constituencies.

25.—(1) Representatives of Divisions shall be elected by Constituencies formed as follows, each such Constituency being entitled to elect one Representative.

(2) Any Division having not less than fifty members may form one Constituency, and except as hereinafter provided every Division having less than fifty members shall be grouped by the Council with another Division, or with other Divisions, to form a Constituency having not less than fifty members.

another additional Representative for every complete 50 (75, 100, or other number) additional Members."

41. Being satisfied that the present system of election has resulted in some cases in the formation of several Divisions in large cities, in order to secure representation, although the local work could probably have been better carried out by a single Division, and being satisfied, also, that the existing system does not give sufficient weight and influence to the large Divisions, the Council considers it advisable to allow such Constituencies to elect more than one member each.

Recommendation.

The Council recommends :

That each Constituency elect at least one Representative and (in the United Kingdom) an additional Representative for each 100 members after the first 50 and that on a card vote the voting power of a Constituency which has more than one Representative be equally divided among all the Representatives of that Constituency.

ELECTION OF COUNCIL FOR THE YEAR 1910–11.

Grouping of Branches.

42. In accordance with the new By-laws relating to the election of the Council adopted at Belfast, it has fallen to the Council to carry out, for the year 1910–11, the duty of grouping the Branches for the election of members of Council which it will in future rest with the Annual Representative Meeting to determine. After twice consulting those Branches in the area of which certain difficulties arose, the Council has deemed it advisable to adhere to the scheme of grouping which was recommended in connection with the Charter to the Annual Representative Meeting at Sheffield, the only departure being that the Divisions of the Metropolitan Counties Branch, together with the Bromley and Croydon Divisions of the South-Eastern Branch, have been constituted as one group electing four members instead of as four groups each electing one member.

43. As regards the Branches outside the United Kingdom, the Council, on the advice of the Colonial Committee, has modified the scheme of grouping placed before the Annual Representative Meeting at Sheffield, by according additional representation to the Australasian Branches corresponding to their large membership.

Procedure for Election of Members of Council.

44. It has fallen to the Council also during the year to determine various details of procedure in connection with the election of the Council. Difficulties have been experienced, especially in connection with the election by the Branches outside the United Kingdom, which it is hoped may be avoided in future years when all concerned have had experience of the new procedure.

45. It will in future rest with the Representative Meeting to determine the procedure to be followed in the election of Members of Council by the grouped Representatives. Standing Orders for this purpose, and also as to the election of Members of Council to represent the Navy, Army and Indian Medical Services will be submitted for adoption by the Meeting.

APPOINTMENT OF STANDING COMMITTEES OF THE ASSOCIATION.

46. The alteration by the Annual Representative Meeting at Belfast of the By-laws relating to the election of Standing Committees has necessitated the consideration of various questions of procedure both of the Representative Meeting and of the Council. The Council will submit to the Annual Representative Meeting various necessary amendments of the Standing Orders of the Representative Meeting relating to this matter.

ANNUAL CONFERENCE OF SECRETARIES.

47. Upon consideration of the Report of the Conference of Honorary Secretaries of Divisions and Branches held at Belfast, the Council has decided again to convene such a Conference in connection with the forthcoming Annual Meeting. It is hoped that in addition to exchanging views for their mutual benefit, the Honorary Secretaries may be able, as in previous years, to render valuable assistance to the Central Executive of the Association by their suggestions upon administrative matters on which their official experience specially qualifies them to advise.

ORGANISATION OF MEDICAL STUDENTS.

Addresses to Students in Medical Schools.

48. The Council has considered the Resolution of the Annual Representative Meeting, that it should be an instruction to the Council to provide for Addresses to be given by members of the Association to Students in the Medical Schools on Medico-Political and Medico-Ethical questions.

The Council has requested the Branches to approach the officials of the Medical Students Unions, or Societies, suggesting the desirability of Lectures being given at their meetings, on Medico-Political or Medico-Ethical subjects, and has promised to assist in providing speakers, if so desired.

Formation of a British Medical Students' Union.

49. Concerning Minute 197 of the Annual Representative Meeting, namely :—

197. Resolved: That the Council should be instructed to investigate and report as to the feasibility of forming a British Medical Students' Union or a similar body under the auspices of this Association, with Branches in all towns having Medical Schools, which shall act as a nursery for future members of the Association.

The Council is not yet in a position to report fully, but regards the question of the formation of a Medical Students' Union as one of great importance, and considers it advisable to make further enquiries before submitting definite recommendations on the subject.

Recommendation.

The Council recommends :—

That the instruction in regard to the formation of a British Medical Students' Union, contained in Minute 197 of the Annual Representative Meeting, Belfast, be continued.

50. In the meantime, the Council, being of opinion that in the event of the formation of a Medical Students' Union under the auspices of the Association it would be desirable that facilities should be afforded to the members of such Union to take part in the social functions of the Annual Meeting, has asked the local Executive of the forthcoming London Meeting to make arrangements for the admission of medical students to the social functions.

APPLICATION FOR A CHARTER.

51. In accordance with the instructions of the Annual Representative Meeting at Belfast, the Organisation Committee submitted to the Privy Council an amended Draft Charter giving effect to those concessions to various opposing bodies which were approved by the Representative Meeting.

52. A communication was received from the Privy Council in April, 1910, informing the Association that the concessions offered had not diminished to any appreciable extent the objections of the opposing bodies, and enquiring whether the Association desired to be heard by Counsel in support of its application. The Privy Council has been informed, in accordance with the decision of the Representative Meeting at Belfast (*Minute* 213), that the Association does not feel justified in incurring the great expense which a Hearing by Counsel would entail, and has therefore decided not to ask to be heard by Counsel in support of its application.

53. In view of the communications above mentioned, the Council has decided to convene a Special Representative Meeting to be held on Tuesday, June 28th, and following day if necessary, for the consideration of proposals which will be set forth in a Special Report of the Council to be issued at an early date. These proposals include a Draft of new Articles of Association and By-laws, prepared in accordance with the instruction contained in Minute 217 of the Annual Representative Meeting at Belfast. If these are approved by the Special Representative Meeting, they will be submitted for adoption by the two General Meetings of the Association required by Statute, the first of which will be held on Wednesday, June 29th.

MATTERS UNDER CONSIDERATION.

54. Provision of Official Maps (Minute 198).
Affiliation of Kindred Associations (Minute 199).
Promulgation of Policy of the Association (Minute 271).

ANALYSIS OF BRANCH REPORTS FOR 1909.

Branch.	Membership. On December 31st, 1908.	Membership. On December 31st, 1909.	Financial Statement. Balance from 1908.	Deficit (if any) from 1908.	Receipts for 1909.	Expenditure, 1909.	Balance to 1910.	Deficit (if any) to 1910.	Meetings. Branch.	Scientific.	Medico-Political, Ethical, &c	Social Functions.	Average Attendance.	Branch Council.	Notes on matters of Branch Organisation, and on other questions of local interest (1909), including the effect on the work of the Branch of the coexistence of other local Medical Societies.
BRANCHES IN THE UNITED KINGDOM.			£ s. d.	£ s. d.	£ s. d.	£ s. d.	£ s. d.	£ s. d.							
Aberdeen	169	164	114 5 6½	—	19 2 0	16 4 0	117 3 6½	—	3	—	—	2	15	5	The Branch holds its Clinical Meetings along with the Aberdeen Medico-Chirurgical Society, which meets monthly during the Winter Session—October till May.
Bath and Bristol	389	409				No	Return.								
Birmingham	498	510	72 5 9	—	53 14 0	90 3 0	35 16 9	—	7	6	3	1	35	7	The Honorary Secretaries consider that the other Medical Societies have very slight effect on the attendance at Branch Meetings, and that they do not interfere with the efficiency of the work of the Branch in maintaining the interest of the profession.
Border Counties	150	142	33 19 0	—	16 2 0	—	—	—	—	—	—	—	—	—	
Cambridge and Huntingdon ..	154	152	40 18 4	—	20 9 0	26 15 3½	34 12 0½	—	3	2	1	2	29·6	5	Branch has arrangement with the Cambridge Medical Society whereby all meetings, except the Annual Meetings, of the Society and the Branch are open to Members of both Societies. Branch holds its meetings in March, July (Annual), and December, and the Cambridge Medical Society in January, February, April, May, June, October, and November This has resulted in a better attendance at both sets of meetings, and has avoided the Societies clashing. All medico-political, ethical and kindred matters are reserved to the Branch Meetings, but clinical and scientific subjects can be brought up at either.
Connaught	39	42				No	Return.								
Dorset and West Hants ..	220	216	102 14 0		23 12 0	19 12 3	106 13 9	—	5	3	2	—	28	5	
Totals	—	—	364 2 7¼	—	132 19 0	152 14 6½	294 6 1	—	—	—	—	—	—	—	

Branch.	Membership. On December 31st, 1908.	Membership. On December 31st, 1909.	Financial Statement. Balance from 1908. £ s. d.	Financial Statement. Deficit (if any) from 1908. £ s. d.	Financial Statement. Receipts for 1909. £ s. d.	Financial Statement. Expenditure, 1909. £ s. d.	Financial Statement. Balance to 1910. £ s. d.	Financial Statement. Deficit (if any) to 1910. £ s. d.	Meetings. Branch.	Meetings. Scientific.	Meetings. Medico-Political, Ethical, &c.	Meetings. Social Functions.	Meetings. Average attendance.	Meetings. Branch Council.	Notes on matters of Branch Organisation, and on other questions of local interest (1909), including the effect on the work of the Branch of the coexistence of other local Medical Societies.
Dundee	109	111	41 17 0	—	11 12 0	12 0 0	41 8 7	—	5	1	3	1	22	7	There is a local Medical Society of much longer standing than the local Branch. The area and membership of the Forfarshire Medical Association and the Dundee Branch are practically the same. The discussion of scientific and clinical matters is left to the Forfarshire Medical Association, except for a clinical meeting held by the Branch every other year. The attendance at the meetings of both Societies is practically the same, both in number and personnel.
East Anglian	439	442	93 8 8	—	46 6 0	58 12 5	81 2 3	—	3	3	—	3	47	4	The Branch meetings are well attended.
East York and North Lincoln	160	179	6 2 6	—	18 2 0	20 15 8	3 8 10	—	1	—	—	1	—	3	The whole of the work of this Branch, both scientific and ethical, is done by the two Divisions.
Edinburgh	401	412	172 15 4½	—	43 2 0	79 7 10	136 9 6½	—	4	1	2	1	48	10	The Branch has been very active during the year. A special meeting was held for the discussion of a new Hospital for Women.
Fife	78	80	34 11 5	—	8 11 3	26 12 4	16 10 4	—	2	1	—	1	—	3	Important matters in connection with contract medical practice in the collieries have been under consideration by the Colliery Surgeons' Committee, and it is hoped that ultimately these deliberations may be attended with beneficial results.
Glasgow and West of Scotland	687	672	312 3 2	—	91 9 10	114 5 11	289 7 1	—	3	1	2	—	70	12	The other medical societies do not affect the work of the Branch.
Gloucestershire	142	137	19 10 6	—	16 9 6	27 17 10	8 2 2	—	10	8	4	8	24·6	9	There is no other Medical Society.
Lancashire and Cheshire ..	1,649	1,629	714 5 4	—	188 11 0	142 15 3	761 1 1	—	2	2	2	2	171	5	There is no local society corresponding in area with the Branch. The Local Medical Societies compete with the Divisions. A Science Committee has been created with a view to organising the scientific work of the Branch and of its Divisions. The expenditure for the year is much below the normal, as grants have only been made to

																	the normal, as grants have only been made to Divisions requiring money. More than half of the Divisions have been called upon to use their accumulated balances to meet their current expenditure.
LEINSTER	302	289	25 9 10	—	31 6 0	65 9 3	—	8 13 3	1	—	1	1	28	7	Resolutions in reference to the Nurses Registration Bill were before the Branch Council. A Science Committee was established towards end of year. There is no doubt whatever that the number of other medical societies in Dublin enormously lessens interest in the Branch and Association.
METROPOLITAN COUNTIES ..	2,718	2,969	949 9 7	—	290 18 8	510 17 11½	729 10 3½	—	2	—	2	—	75	12	The Council and its Emergency Committee have had several meetings and devoted a considerable amount of time to the question of medical inspection of school children, and have corresponded with the Board of Education and L.C.C. on the subject. The matter is still under consideration.
															The ethical questions involved in the Hampstead Hospital dispute have occupied much of the time of the Branch Council. The question of the attempt of the Federated Societies Medical Benefit Association to extend a system of Contract Practice over the Metropolitan area in what was thought to be a most pernicious manner was considered by the Branch Council, and the Council, after examining the Societies' Scheme, was of opinion that the Scheme contravened in every particular the conditions laid down by the Association in its Contract Practice Report. A memorandum was prepared by the Council and sent to all its Members. The Branch invited the Direct Representatives of the Medical Profession in England and Wales to address their constituents. The invitation was accepted, and the three Direct Representatives, Drs. Langley Brown, McManus, and Latimer, addressed the meeting of the Branch on November 22nd, 1909, to which non-members were invited.
MIDLAND	539	550	171 16 7	—	74 2 8	89 10 0	156 9 3	—	1	1	—	—	37	3	It is not thought that other loca Medical Societies make much difference to the Branch Meetings, but they probably do to the Divisional Meetings.
MUNSTER	101	98	62 17 7	—	13 14 10	13 17 2	62 15 3	—	2	—	2	—	13	1	The Cork Medical and Surgical Association does the scientific and social work. The Cork Medical profession embraces ethical matters for Cork City. The Branch is of the greatest importance for dealing with the general interests of the profession in Munster and elsewhere. The meetings apart from the Annual General Meeting are summoned as occasion requires. Also the members are furnished from time to time with reports and resolutions affecting general interests.
NORTH OF ENGLAND	682	702				No	Return.								
NORTHERN COUNTIES OF SCOTLAND	113	116	28 12 4	—	12 12 0	22 2 8	19 1 8	—	3	3	3	—	30	3	
N. LANCASHIRE AND S. WESTMORELAND	125	124	66 15 8	—	13 16 1	6 10 6	74 1 3	—	2	2	—	—	21	2	
TOTALS	—	—	2699 15 6½	—	860 13 10	1190 14 9½	2379 7 7	8 13 3	—	—	—	—	—	—	

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			£ s. d.	£ s. d.	£ s. d.	£ s. d.	£ s. d.	£ s. d.							
North Wales	203	199	45 19 1	—	29 7 2	17 16 10	57 9 5	—	2	2	1	2	42	3	The meetings of the Branch held during the year were very well attended, and devoted mainly to clinical work, the contributions being of a very interesting nature. The meetings of the Divisions have been chiefly devoted to the consideration of medico-political and ethical matters.
Oxford and Reading	287	290	93 16 3	—	30 10 0	51 10 5	77 15 10	—	2	2	1	1	40 to 50	2	The Reading Pathological Society and the Oxford Medical Society hold very successful meetings in their respective towns, but do not materially affect the attendance of the one or two meetings of the Branch held during the year.
Perth	—	—	31 17 11	—	6 8 3	9 18 4	28 7 10	—	6	2	5	2	10	5	Motor Car 10 M.P.H. limit, the only question of local interest dealt with, but unfortunately without complete success. No other medical societies exist now in Perthshire. There is much lack of interest on the part of Town Members of the Branch. County Members do take more interest.
Shropshire and Mid-Wales ..	132	129	28 15 8	—	13 8 0	21 5 11	20 8 0	—	5	4	1	1	25	3	There are no other local medical societies.
South-Eastern	1,270	1,044	768 3 2½	—	142 13 4	156 1 3¼	754 15 3	—	1	—	—	1	65	4	The question of the partition of the Branch which has been raised in the Council was referred to the Divisions, a majority opposed it and at the Annual Meeting it was resolved to take no further action.
South-Eastern of Ireland ..	58	56	3 15 5	—	7 18 0	8 9 8	3 3 9	—	7	5	2	5	9·3	2	
outhern	417	427				No	Return.								
South Midland	203	254	32 0 0	—	27 6 6	26 3 8	33 2 10	—	2	2	—	2	27½	3	Local Societies at Kettering, Rugby, and Bedford, which have no effect on attendance or efficiency of Branch meetings.
South Wales and Monmouthshire.	533	553	78 0 7	—	57 2 0	90 0 0	45 2 7	—	4	3	1	1	33	6	
South Western	454	454	74 16 0	—	47 12 0	91 19 2	30 8 10	—	5	3	1	—	20	9	One meeting at Plymouth was entirely spoiled by the Plymouth Medical Society arranging a

SOUTH WESTERN	454	454	74 16 0	—	47 12 0	91 19 2	30 8 10	—	5	3	1	—	20	9	One meeting at Plymouth was entirely spoiled by the Plymouth Medical Society arranging a meeting for the evening of the date of the Branch Meeting. The arrangement of the Divisions of the Branch is still unsettled, but it is hoped that it will shortly be completed. The appointment to School Inspectorships in Cornwall has received the attention of the Branch Members resident in Cornwall. The Cornwall County Nursing Association Rules have also occupied the attention of the Cornish Members. Practice by unqualified persons—the circular of the Local Government Board has been considered. The new grouping of Branches has received consideration. Fees paid by Guardians for assisting midwives, and fees for medical witnesses under the Workmen's Compensation Act have been considered.
STAFFORDSHIRE	206	204	124 3 10	—	20 18 0	13 17 3	131 4 7	—	4	4	—	4	20	3	There are no other local Medical Societies in North Staffordshire, but I believe there is a local society at Burton-on-Trent.
STIRLING	67	66	38 9 1	—	7 2 0	6 3 9	39 7 4	—	3	2	1	—	15	2	
ULSTER	357	409	69 1 2	—	43 14 0	72 4 1	40 11 1	—	4	—	—	1	30	7	The local Society—the Ulster Medical Society—works in complete harmony with the Branch, meeting with it occasionally to discuss medico-political questions when such arise. The Branch meetings are held in the afternoon, and draw a larger proportion of country men than do the meetings of the Ulster Medical Society, which are generally evening meetings. The Branch organised and carried through successfully the Belfast Meeting of the Association, July, 1909.
WEST SOMERSET	72	71	44 10 0	—	7 14 0	5 8 7	45 13 11	—	4	3	3	2	15¼	4	
WORCESTERSHIRE AND HEREFORDSHIRE	130	137	64 15 5½	—	13 10 0	30 18 5	27 7 8½	—	3	3	1	—	23	3	A Conference of the Branch with the Gloucester Branch was held in November in reference to cases sent to Hospitals in consequence of the Medical Inspection of School Children, and a unanimous resolution was passed with an intimation to the respective Branch Secretaries that the Local Authorities concerned should be informed that such cases should not receive general treatment in Hospitals to which an Honorary Staff is attached, and would suggest to the Education Authority that they should make arrangements for the requisite treatment by the medical men in their respective districts; and further, that such cases should not be treated in general Hospitals unless recommended by a medical practitioner. The authorities were also informed of the Resolution unanimously adopted at Belfast by the Representative Meeting that school children should not be referred to Public Medical Charities for treatment found defective on Medical Inspection, whether or not accompanied by payments or subsidies. Hereford and Worcester have each a local Medical Society. The former is in a state of suspended animation for the want of an annual dinner, and the latter, I am informed by the Division Secretary, is fruitful and active in Medical and Social work, and does not affect the efficiency of Division.
YORKSHIRE	910	903	180 10 0	—	99 2 4	138 1 10	141 10 6	—	3	—	—	—	35	3	Only 30 new members have been elected during the year and the total membership is 903, which is a decrease of seven. The Wakefield and Doncaster Division has been reorganised and has 59 members. Several of the Divisions have dealt with the question of the Medical Inspection of School Children. The Sheffield Division made a successful protest against the Education Authority subscribing to the Hospitals for recommends for treatment of medically inspected school children. The Branch meetings are not well attended. This is chiefly due to the fact that a great deal of the work formerly done by the Branches is now allocated to the Divisions, and many of the older members who used to attend the Branch Meeting regularly no longer do so, therefore the attendance at the Division meetings, with two or three exceptions is extremely small, and as far as the Yorkshire Branch is concerned there is no doubt that formerly matters of importance to the profession were much more thoroughly discussed at the Branch meetings than they are now at the Division meetings. In several of the large towns the existence of a strong local medical society no doubt has an effect on the attendance at the Branch meetings.
TOTALS	—	—	1683 13 8	—	554 5 7	739 19 2½	1476 9 5½	—	—	—	—	—	—	—	

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BRANCHES OUTSIDE THE UNITED KINGDOM.			£ s. d.	£ s. d.	£ s. d.	£ s. d.	£ s. d.	£ s. d.							
ASSAM	18	24				No	Return.								
BARBADOES	32	34				No	Return.								
BERMUDA	12	12				No	Return.								
BOMBAY	108	159	18 1 5	—	35 16 4	24 12 5	29 5 4	—	5	4	1	3	13	3	The most important question discussed by the Medical Profession this year was that of the "Registration of Medical Practitioners in India." The Medico-Ethical Committee of the Branch, after discussing the whole question, deputed Lieutenant-Colonel H. P. Dimmock, I.M.S. (their Vice-President), to introduce the question in an address to be delivered before a meeting of the profession to be called under the auspices of the Branch. This was done in August, 1909, when over 100 medical men met in the University Library, and by a majority of 93 passed a Resolution definitely emphasizing the necessity for a Registration Act, and appointed a Representative Committee to give effect to the Resolution. This Committee consisted of Representatives of all the existing medical societies in Bombay and the senior members of the profession with Representatives of the various services and the Council of the Branch. Amongst others the Military Assistant Surgeons and Civil Medical Assistants (who are diplomates of Indian Colleges, authorised to practise Medicine, Surgery, and Midwifery in India) were each represented by one member from their services. The Committee entrusted the question to a Sub-Committee, who considered the whole question, and their report was accepted by the Committee after minor changes.
BORDER BRANCH, SOUTH AFRICA	56	60				No	Return.								
BRISBANE AND QUEENSLAND ..	153	163	127 9 5	—	354 15 8	347 3 5	130 2 1	—	12	12	—	—	15	12	
BRITISH GUIANA .. .	40	39	14 0 1½	—	8 3 6	5 17 4	16 6 3½	—	4	4	—	—	15	3	Matters of public health were largely dealt with this year, more particularly antimosquito sanitation, water supplies, and leprosy. It is difficult to maintain the interest of the profession, since the great distances, the exigencies of a Government Medical Service, and the lack of easy and rapid transport, prevent more than a few medical men meeting together.
BURMA	57	69	56 19 9½	—	95 5 2½	88 8 0	64 17 0	—	12	5	—	—	14	1	

CAPE OF GOOD HOPE, EASTERN ..	52	58	11 5 1	—	17 3 6	34 18 11	—	6 10 4	6	4	6	1	7	4	No other local medical societies exist. Large attendance is prevented by the prohibitive distances and inconvenient train services. *Matters dealt with:* Formation of South African Committee of British Medical Association; Treatment of highly-paid Officials of Railway under Railway Sick Fund Board's Contracts; Report of Select Parliamentary Commission of Colonial Medical Council; Publication of Proceedings of the Colonial Medical Council; Amendment of Medical Acts; Vaccination of white population; Model Regulations for the control of storage and sale of bread, meat, and milk.
CAPE OF GOOD HOPE, WESTERN	137	137			No Return.										
COLOMBO, CEYLON	151	150	30 8 11	—	227 15 11	237 1 11	21 2 11	—	7	—	—	2	96	2	
EGYPT	38	37			No Return.										
GIBRALTAR	19	19	9 14 5	—	3 8 0	1 8 3	11 14 2	—	2	1	1	1	10	5	There were no questions of special local interest dealt with by the Branch. There is no local medical society apart from the Branch.
GRIQUALAND WEST	41	36			No Return.										
HALIFAX, NOVA SCOTIA	85	81	46 13 10	—	17 5 4	12 17 0	51 2 2	—	15	14	—	1	17·8	4	
HONG KONG AND CHINA ..	116	124			No Return.										
JAMAICA	50	49			No Return.										
LEEWARD ISLES	17	15			No Return.										
MALAYA	91	94	$ c. 229 37	—	$ c. 791 67	$ c. 609 34	$ c. 411 70	—	—	—	—	—	—	—	There has been no meeting in any of the Divisions during the year, as it has been found impossible to persuade any member either to read a paper or bring forward any subject for discussion. It is to be hoped that in the ensuing session the members will take a keener interest in the work of the Branch, as it is only at such meetings that a full interchange of ideas on any medical question can take place.
MALTA AND MEDITERRANEAN ..	32	31			No Return.										
MELBOURNE AND VICTORIA ..	441	504	£ s. d. 101 3 11	£ s. d. —	£ s. d. 365 4 0	£ s. d. 596 12 3	£ s. d. 132 15 8	£ s. d. —	14	14	—	—	46	18	
MONTREAL	59	58			No Return.										
NATAL	124	119	167 14 6	—	150 4 7	162 2 8	155 6 5	—	2	1	2	1	21	3	
TOTALS	—	—	573 11 5 + $229 c.37	—	1575 2 0½ + $791 c.67	1511 2 2 + $609 c.34	612 12 0½ + $411 c.70	—	—	—	—	—	—	—	

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			£ s. d.	£ s. d.	£ s. d.	£ s. d.	£ s. d.	£ s. d.							
New Zealand	395	426	155 1 0	—	958 14 0	721 6 8	392 9 1	—	2	1	1	3	35	4	The Branch Council have pleasure in reporting a considerable increase in membership, 44 new members having been added to the roll during the past year. The membership of the Branch is now 432.

At the four Quarterly Meetings of the Council held during the year all Divisions were well represented, and a large amount of business was dealt with.

Medical Practitioners Registration Bill.—At the last Annual Meeting it was unanimously resolved that immediate steps be taken to, if possible, bring about an amendment of the Medical Practitioners Registration Act of 1869, so as to bring the law in New Zealand in conformity with the Australian and English Acts, and a Committee was set up to further that object with the least possible delay. The Committee, after several interviews with the Minister of Public Health, succeeded in drawing up a Bill which, in the opinion of this Council, meets the views of Members in every essential respect. Unfortunately, however, owing to the shortness of the last Session of Parliament, the introduction of the Bill has had to be postponed until next Session. There is every reason to hope that a good workable measure will find its place upon the Statute Book during the 1910 Session.

Representation on Central Council.—The Members of the Branch will have learned with some surprise that a recommendation was recently made by the Colonial Committee of the Central Council that New Zealand be grouped with the Australian Branches for the purposes of representation, and that such group should be entitled to only one delegate. Our representatives upon the Central Council, who have succeeded in getting consideration of the matter postponed, have been instructed to strongly oppose the proposed grouping, as there is no community of interest between the Commonwealth and New Zealand, and such a step would mean practical disfranchisement of the New Zealand Branch.

New Divisions.—The Central Council has approved the application of the Members resident in the Poverty Bay District to be constituted a separate Division of the New Zealand Branch. Application has also been made to form a new division on the west coast of North Island, extending from Otaki to Wanganui.

New Zealand Medical Journal.—The *Journal* has been published regularly during the year, and that increasing interest is being taken in it is proved by the fact that the Editor has been kept fairly well supplied with copy of considerable interest. The Canterbury Division is the only one that has regularly furnished a full report of its meetings, but the Hawke's Bay and South Canterbury Divisions are now doing so, and it is hoped that all Divisions will shortly appoint local secretaries, whose duty it will be to forward a *précis* of the work done at divisional meetings for publication in the *Journal*. The resident medical officers of the chief hospitals have also promised to assist with papers, until such time as Medical and Surgical Registrars are appointed in the large centres.

Finance.—Owing to the rapid increase in our membership, combined with careful management, the Branch is now in a stronger position financially than at any period of its existence. The statement of accounts for the year shows a substantial balance to credit of the Branch funds.

St. John, New Brunswick ..	41	37	15 8 0	—	7 19 0	0 5 5	23 1 7	—	2	2	—	—	7	1	
Saskatchewan	35	29			No return.										
South Australian	156	159			No return.										
South Indian and Madras ..	150	169	173 16 8	—	38 4 8	40 2 2	172 9 2	—	4	4	—	—	20	—	
Sydney and New South Wales	637	690	770 11 5	—	1335 3 6	1379 11 6	726 3 5	—	17	5	12	..	40 to 50	21	The coexistence of other local medical associations does not seem to affect the attendance at the Branch Meetings; they materially increase the efficiency of the Branch in maintaining the interests of the profession.
Toronto	372	329			No return.										
Transvaal	98	104			No return.										
Trinidad and Tobago	28	26			No return.										
Western Australian	76	100	75 17 1	—	193 17 6	225 17 7	23 17 0	—	—	—	—	—	—	—	
Totals	—	—	1170 14 2	—	2533 18 8	2367 3 4	1338 0 3	—	—	—	—	—	—	—	

SCIENCE.

Central Research Laboratory.

55. In accordance with the instruction contained in Minute 242 of the Annual Representative Meeting at Belfast, the Council has considered the advisability of establishing a Central Research Laboratory for the use of Members.

Recommendation.

The Council recommends :—

That, having regard to the considerable facilities for Research which at present exist in various parts of the country, and the heavy financial requirements of such an undertaking, it is inadvisable for the British Medical Association to attempt to establish a Central Research Laboratory.

Appointment of Materia Medica Committee.

56. Concerning the following motion brought before the Annual Representative Meeting at Belfast, and referred to the Council for report:—

That the Council be requested to appoint a Materia Medica Committee, whose duty it will be, with such professional aid as they can summon to their assistance, to investigate and pronounce on the uses and properties of all drugs which shall be used by the profession, and that in view of the grave injury inflicted on the public and on the profession alike by the present wholesale introduction of drugs by mere commercial firms, whereby the ground is being cut from under our feet, and the gullible public are induced to accept nostrums on the sole strength of mere assertions, that the hospitality of our museum and the pages of our JOURNAL shall be both shut out from giving any further aid to the wholesale advertisements of drugs and preparations, the sole virtues of which have too often no existence save in the mendacity of their introducers ;

the Council reports, in reference to the proposal to appoint a Materia Medica Committee, that a Therapeutic Committee is already in existence. The subject of the second part of the motion is referred to in the Report on a Motion, to the same general effect, placed before the Belfast Meeting by the Birmingham Central Division (*see* paragraphs 8 to 11 above).

Central Library.

(*a*) *Hours of Opening.*

57. In accordance with Minute 240 of the Representative Meeting at Belfast, the Council has considered a suggestion that the hours during which the Library of the Association is open should be extended, and that 10 a.m. to 8 p.m. would be convenient hours.

The Council reports that the Library already opens an hour earlier than any other Medical Library ; that there is no evidence of a general desire for the proposed change, the approximate cost of which would be £100 per annum ; and that the only way of estimating the popularity of such an extension of time would be to keep the Library open until 8 p.m. for a trial period.

(*b*) *Inauguration of Lending Department.*

58. The rehousing of the Library being now almost complete, the Council has made arrangements for giving effect to its previous decision to form a Lending Library of Periodicals, Transactions, Monographs, &c. A comprehensive list has been prepared of publications which are available for lending, and it is hoped that the department will be in working order by the time of the appearance of this Report.

59. The Council, on the recommendation of the Science Committee, has decided to include in the Lending Department 3,000 volumes in addition to the periodicals and transactions above mentioned. A list of such books is in course of preparation, and when complete will be issued to Members desiring it at a price of 1*s*.

REPRESENTATIVES OF DIVISIONS AT SECTIONS.

60. In accordance with the instruction contained in Minute 238 of the Representative Meeting at Belfast, the Council has called the attention of the Divisions to the fact that it is open to them to request any of their members to take part in the proceedings of any Section of the Annual Meeting of the Association.

ATHLETICISM IN SCHOOLS.

61. The Council has considered the following Resolution of the Section of Medicine at the Annual Meeting at Belfast:—

That the Medical Section of the British Medical Association meeting at Belfast desires to suggest to the Central Council that they should take into their consideration the question of securing a professional announcement as to the most suitable manner in which athleticism in schools may be so organised and controlled as to achieve the maximum of benefit, and to reduce to a minimum any risk of harm to the individual schoolboy.

The matter having been referred to a Committee in which the Association has had the advantage of the assistance of gentlemen specially qualified to advise on the subject, the Council has decided to make the following Pronouncement, and steps are being taken to give it wide publicity:—

That it is desirable that a Pronouncement should be made by the Association on the subject of Athleticism in Schools, as follows:—

(1) A due amount of regular bodily exercise for each individual is one essential element in any complete scheme of education. The fitness, or otherwise, of a pupil to undertake and to benefit by exercise must always be largely determined by the conditions of his every-day life at school. In this connection his diet, the times and arrangement of his meals, the nature, conditions, and duration of the mental work demanded of him, and the amount of healthy sleep secured to him, are all of vital importance.

(2) All the pupils of any school should be under the personal supervision of a single medical authority, whether this consists of the School Medical Officer or (as may be advisable in very large schools) of a Medical Board specially constituted to that end.

(3) Every boy should be subjected to a thorough medical examination by the School Medical Authority when he first enters the school. This may reveal obvious defects or disabilities in some instances; and in other cases may show the need for special observation during, at any rate, the earlier years of school life.

(4) A boy's fitness for physical exertion depends upon his physical and constitutional ability, and is not to be gauged merely by his age, which, taken by itself, is often a misleading criterion of strength and endurance.

(5) It is most desirable that a course of systematised physical training should be adopted for all boys in schools.

(6) Careful observation of the behaviour of the new and younger boys during their ordinary games, &c., and of the physical effects thus produced upon them individually, affords a valuable means of estimating the fitness of each for subsequently undertaking more strenuous exertion.

(7) It is most important that there should be an ample interval (one hour at least) between the end of a substantial meal and the beginning of strenuous exercise. There is clear evidence that the neglect of this elementary rule is responsible for a very large proportion of the evils which have been attributed to over-exertion alone. The nature, quality, and quantity of food, and hours of meals, require careful consideration and adjustment.

(8) Special caution is required in permitting a resumption of active exercise to convalescents—particularly after diphtheria, influenza (including "influenzal catarrhs"), rheumatism and measles, *and* during a period of rapid growth.

(9) Paper-chases, school and house runs should be distinguished from races; but so far as they include the element of competition, and, therefore, to some extent, the strain of racing, boys should be selected and grouped for a specified distance in accordance with their physical capacity. The plan of running all boys—the young and the older, the strong and the less vigorous—together, over the same distance, is not to be recommended. Whenever, for any reason, such a plan is adopted, special measures must be taken to ensure that the smaller and weaker boys are not called upon for excessive or too prolonged exertion.

Evidence, obtained from a great many schools, upon the results of long-distance races, shows that they very seldom entail risk, provided that the competitors are selected and watched during practice with the care and precautions already indicated.

(10) Medical examination and skilled supervision are also needed in regard to rowing, boxing, and swimming. Competitions in long-distance diving and in long-distance swimming are dangerous for young adolescents.

(11) The above considerations as to periodical medical examination and careful individual supervision are equally applicable in the case of girls engaging in active exercises.

The British Medical Association wishes gratefully to recognise the work previously done on this subject by the Medical Officers of Schools Association. This has been of the greatest assistance in preparing the present Pronouncement, which, to a great extent, embodies the Resolutions formulated by the Medical Officers of Schools Association and adopted in March, 1909.

MEDICAL ETHICS.

SPECIAL CLASS OF CONSULTANTS.

62. The Report on the Recognition of a Special Class of Consultants was circulated to the Divisions in accordance with the instruction of the Annual Representative Meeting in November 1909. The analysis of the replies received from the Divisions up to April 8th, 1910, is as follows:—

Answers to Questions.

To the first question—

Yes	45
No	36

To the second question—

Yes	29
No	38

The answers to the first question in the Report, namely:—

Is the Division in favour of the recognition of a special class of consultant on the lines indicated in this Report?

were—

Yes	39
No	32

The answers to the second question, namely:—

Is the Division in favour of the Association prescribing Regulations for the conduct of the practice of such a class?

were—

Yes	25
No	34

Recommendation.

63. Upon consideration of these Replies the Council recommends:—

That having regard to the replies received from the Divisions, it is inadvisable to proceed at present to the drafting of any regulations to govern a special class of consultants.

ETHICS OF CONSULTATION.

64. In accordance with the instruction of the Representative Meeting at Belfast (Minute 40) verbal amendments have been made in the second paragraph of the Report on the Ethics of Consultation in order to remove the ambiguity then pointed out. The Report is filed in the Central Office for reference, and for issue to each new Honorary Secretary and to inquirers as a statement of the opinions of the Association upon the various matters referred to therein.

THE RELATION OF THE ASSOCIATION TO HOMŒOPATHS.

65. The Report on the relation of the Association to Homœopaths which the Council was instructed to prepare by the Representative Meeting at Sheffield, and which was not ready for consideration at Belfast, was issued to the Divisions in February, 1910. The analysis of the Replies of the Divisions and a Recommendation of the Council thereon will be included in the Supplementary Report of the Council.

REPUBLICATION OF ARTICLES ON MEDICAL SUBJECTS.

66. The decision of the Representative Meeting that it is the professional duty of Medical Authors of Articles in Medical Journals to co-operate with the Proprietors and Editors of those Journals in preventing improper use of such Articles for the purpose of advertisement, has been duly noted for the guidance of the Council. Steps have been taken to bring this pronouncement systematically under the notice of contributors to the BRITISH MEDICAL JOURNAL.

POSITION OF PRACTITIONERS EXAMINING ON BEHALF OF INTERESTED PERSONS.

67. The Council has prepared a special Report on the position of Practitioners who examine patients on behalf of persons other than the patients themselves. This special Report will be issued to the Divisions at the earliest date practicable, and will be placed before the Representative Meeting with a Report on the replies of Divisions received up to that date.

CASES BEFORE THE GENERAL MEDICAL COUNCIL.

68. The Central Ethical Committee has reported to the Council that it has investigated the circumstances of four cases in which application has been made by Divisions or Branches to the Association to bring the conduct of medical practitioners under the notice of the General Medical Council. In each case the Central Ethical Committee, acting under the authority delegated to it by the Council, has been satisfied that circumstances existed which should be brought within the cognisance of the General Medical Council, and the necessary steps to that end have been taken in the name of the Association.

HAMPSTEAD HOSPITAL.

69. The Council has had under consideration the Hampstead Hospital Dispute which was the subject of a special instruction of the Annual Representative Meeting at Belfast. At the time of that Representative Meeting it was known that three Members who had been called upon by the Council in the previous January to take certain action had not taken that action, but an opportunity had been left to them still to do so. Immediately after the Representative Meeting they were called upon to declare definitely what action they were prepared to take, and their replies were referred to the Metropolitan Counties Branch, of which they were members.

70. Representations subsequently made by the Branch were considered by the Council at its January Meeting, when it was decided to accept the expression of regret tendered by the three Members, and the assurance which they at the same time gave that they would co-operate with the Association with a view to bringing about an amicable settlement of the dispute. In view of this expression of regret and assurance, it was decided to take no further action.

CASES OF EXPULSION.

71. The Council regrets to have to report that it has found it necessary to remove from membership of the Association five Members who accepted, and continued to hold, appointments while knowing that such action was in opposition to the declared views of the Branches of which they were Members.

AMENDMENT OF WARNING NOTICE REGULATIONS.

72. Cases brought to the notice of Central Committees within the last three years have led to the conclusion that amendments of the Regulations relating to the Warning Notice are desirable. Action in the matter was deferred until cases turning upon alleged disregard of the Notice under existing conditions should have been disposed of, but amendments are now under consideration, and it is hoped that they will be effected before the Annual Representative Meeting.

MEDICO-POLITICAL.

CONTRACT PRACTICE.

Federated Friendly Societies Medical Benefit Association.

73. The advisability of supporting the Federated Societies Medical Benefit Association (Minute 274, Annual Representative Meeting) has received consideration in conference with Representatives of the Metropolitan Counties Branch. The Branch has been informed that the case of this Association cannot be distinguished on grounds of principle from ordinary Friendly Societies, and has been informed that any action taken with regard to it should form part of an organised movement for improving the conditions of Friendly Society appointments generally in the Metropolis. The Metropolitan Counties Branch is taking action in the matter.

Public Medical Service.

74. The question of the drafting of a scheme for a comprehensive Public Medical Service (Minute 118, Annual Representative Meeting) is receiving consideration in connection with the subject of the Reform of the Poor Law, to which it is closely related. The Council is not yet in a position to report.

Formulation of Resolutions on Contract Practice.

(Minute 119 of Annual Representative Meeting.)

75. This subject is under consideration.

Conference with Representatives of Friendly Societies.

76. Definite arrangements have been made for the periodical holding, on occasion, of Conferences between Representatives of the Association and Representatives of the leading Friendly Societies, under the Chairmanship of Sir Edward Brabrook, in continuance of the Conference organised by the Charity Organisation Society, as reported to the Annual Representative Meeting at Belfast.

77. It has been agreed that the Conferences shall be purely advisory for the present, the resolutions passed being expressions of opinion of those attending only, and not regarded as binding the bodies which they represent. It is believed that Conferences thus limited in scope may be of service to both parties represented, and that for the time being it would be unwise to attempt to give authority greater than that stated to the decisions.

Action taken in Contract Practice Cases.

78. Action has been taken since the last Representative Meeting in the following cases of dispute in connection with Contract Practice Appointments:—Llanbradach (Colliery Appointment), Colchester (Liverpool Legal Friendly Society Appointments), Kelty, N.B. (Colliery), Eastchurch (Medical Benefit Society), Great Yarmouth (Friendly Society Medical Institute), Brodsworth (Colliery), Ebbw Vale (Colliery), Wheldale (Colliery), Wallsend (Shipyard and Nursing Association), Warrington (Works Club), Ammanford (Colliery), Walney Island (Friendly Society), Aberaman (Colliery), Coventry (Dispensary), Burwell (Friendly Society), Cwmavon (Workmen's Fund), Burnley (Medical Aid Association), Wroughton (Friendly Society), Preston (Friendly Society), Salisbury (Friendly Society).

PUBLIC APPOINTMENTS.

Action taken with respect to Appointments of School Medical Officers and other Public Appointments.

79. Action has also been taken during the year with respect to the following public appointments:—Essex (Lady Medical Inspector of School Children), Fife County (Lady Medical Inspector of School Children), Forfarshire (Lady Medical Inspector of School Children), Bradford (Assistant to the School Medical Superintendent), Glasgow (Part-time School Medical Officers), Edinburgh (Lady School Medical Officer), Hanley (Lady School Medical Officer), Grimsby (Medical Inspector of School Children), Glamorgan County (Medical Inspector of School Children), Bromley (Temporary Lady School Medical Officer).

Postal Medical Service.

80. An application was received from the Postal Medical Officers' Association in September for assistance from the British Medical Association in the matter of the alleged inadequacy of the fees offered by the Government to the Postal Medical Officers for medical examination of civil servants in connection with the new pension scheme. Owing to the insufficiency of information furnished, the Association was unable to give the desired assistance. In view of this case and of several applications from members of the Association to take action with regard to the condition of the Postal Medical Service, a renewed application was made to the Postal Medical Officers' Association to supply that detailed information as to the conditions of that Service for which the British Medical Association has repeatedly asked, and without which the Association could have no sure basis for action. Failing the desired assistance from the Postal Medical Officers' Association, it has been decided to proceed with an independent inquiry.

MEDICAL INSPECTION AND TREATMENT OF SCHOOL CHILDREN.

Action of London County Council with regard to Treatment of School Children at Hospitals.

81. As directed by the Representative Meeting (Minutes 99, 100), communications were addressed to the members of the Staffs of London Hospitals, the Medical Committees of these Hospitals and the Education Committee of the London County Council, expressing the regret of the Association that the London County Council had made arrangements for the treatment of some school children by the Voluntary Hospitals. The London County Council replied that they had given careful consideration to the representations, but did not propose to take any steps. Of the 1,242 members of Hospital Staffs addressed only six replied. Replies were received from sixteen Hospitals, most of whom stated that every care would be taken to exclude children who were found to be unfit subjects for gratuitous treatment.

82. Only one Division availed itself of the offer made, in accordance with Minute 103, to send a similar communication to provincial bodies corresponding to those mentioned in Minute 100.

Importance of Prompt Action on the lines indicated in the Report on Medical Inspection.

83. In accordance with Minute 104, a copy of the Medical Inspection Report, with the Recommendations as amended by the Meeting, was sent to Chairmen, Secretaries and Representatives of Divisions, together with a Memorandum on the importance of the Divisions taking prompt action on the lines indicated in the report. A considerable number of Divisions have availed themselves of the offer made to send a copy to any local member of the profession who was employed in administrative duties connected with Medical Inspection, or who was a public representative on one of the local bodies responsible for Inspection. The replies received from the Divisions to the communications above stated have satisfied the Council as to the necessity of the elaboration of definite suggestions for the assistance of the Divisions in dealing with the problems which arise in connection with the treatment of school children. A provisional scheme is in process of preparation, and will be circulated for preliminary consideration by the Divisions. After their comments have been received and considered, a revised scheme of suggestions will be issued.

NURSING.

Registration of Nurses.

84. The Prime Minister, in his reply to a Deputation representative of various Nursing Associations which waited upon him in the summer of 1909, indicated the impossibility of the Government giving any facilities in Parliament for a Bill on the subject so long as those interested in the matter were divided among themselves. As a result, Conferences of Representatives of various bodies concerned were convened by Lord Ampthill, who has shown a special interest in the subject, and carried a Bill through the House of Lords in the Session of 1909. The British Medical Association acceded to an invitation to take part in these Conferences, which resulted in the preparation of a Bill agreed to by all who took part. The representations of the British Medical Association were successful in securing all the provisions upon the importance of which the Representative Meeting has insisted. The Bill in question has now been introduced by Mr. Ferguson in the House of Commons.

Rules of Nursing Associations.

85. The Model Rules for District Nursing Associations approved by the Representative Meeting (Minutes 128, 129) were forwarded to the Queen Victoria's Jubilee Institute, and a Deputation from the Association met a Committee of the Institute in conference on February 14th, 1910. The suggested Rules of the Institute were considered, in conjunction with the suggested Model Rules of the Association, and various alterations in the former were agreed to as meeting the views of the Association. These, it is understood, will be given effect to in revised Model Rules for Nursing Associations affiliated to the Institute, to be issued shortly.

86. This result has made desirable certain amendments of form and wording of the Model Rules provisionally approved by the Representative Meeting at Belfast, so that they may be in keeping with those agreed upon with the Jubilee Institute.

Recommendation.

87. The Council recommends:—

That the following Model Rules for inclusion in the Rules of District Nursing Associations be adopted in place of those approved by the Annual Representative Meeting at Belfast:—

1. The nurse shall in every case carry out the directions of the Registered Medical Practitioner in attendance.

2. The nurse, when requested in an emergency, may visit and render first-aid to any person without awaiting instruction from a doctor.

3. If, in the nurse's opinion, the attendance of a doctor is necessary, she must insist that he be sent for; and if for any reason his services are not immediately available, she must, if the case be still one of urgency, remain with the patient and do her best until he arrive, or until the emergency is over.

Should the advice to call in a doctor be not acted upon, the nurse must at once leave and report the case to her Secretary, and must not attend again except in case of fresh emergency.

4. Should any further attendance be requested by the patient after the emergency is over, the nurse must explain that the doctor will decide whether or not this is necessary.

5. No attendance after a first visit shall be given by a nurse unless she has informed a doctor and received his instructions with regard to the case, if any.

6. Apart from her duties as a certified midwife, a nurse must on no account prescribe or administer on her own responsibility such drugs for her patients as should only be prescribed by a medical man.

7. It is desirable to obtain the co-operation of all the medical men in the district, and in the larger Associations to obtain, if possible, the assistance of one or more of them on the Committee.

(Attention is drawn to the fact that the machinery of the local Divisions of the British Medical Association is available for this purpose.)

8. No midwife in the employment of a Nursing Association should accept an engagement without first asking the patient to state, and herself registering, the name of the doctor to be called in should any emergency arise.

9. A nurse shall in no case attempt to influence a patient in the choice of a doctor.

10. No person shall be employed by the ..... Association as a midwife, or received for training as a midwife, without having first signed an agreement not to practise as a midwife within a radius of.....miles from .....within a period of.....after leaving the service of the Association, without the consent in writing of the Association.

MIDWIVES.

Administration of the Midwives Act, 1902.

88. Since the Annual Representative Meeting at Belfast, the Report of the Departmental Committee of the Privy Council on the working of the Midwives Act has appeared and has received careful consideration through a Special Sub-Committee. The recommendations of the Departmental Committee include many of the reforms which were suggested by the Association in its evidence, the main difference being that the Poor Law Authority is recommended as being the proper body to pay medical men called in to assist midwives, instead of the Sanitary Authority as suggested by the Association. A further report on this matter will be presented later, but in the meantime it is gratifying to observe that the Government has recently introduced into the House of Lords a Bill to amend the Midwives Act, 1902, which includes a provision that the British Medical Association shall appoint one member of the Central Midwives Board.

Subsidising of Midwives.

89. The following Motion (Minute 132 of the Representative Meeting) is under consideration :—

> That the Central Council be instructed to consider the following subject, to consult the Divisions thereon, and to report on it to the next Annual Representative Meeting :—
>
> > That the subsidising of midwives by Public Authorities, Nursing Associations, and similar bodies is undesirable in districts where adequate medical attendance is available, and that in the interests of the parents and child any assistance rendered should take the form of partially or entirely providing a registered medical practitioner and nurse.

Manchester Corporation and Payment of Medical Men called in to assist Midwives.

90. The Midwives Supervising Committee of Manchester through the Medical Officer of Health for that City, brought to the notice of the Association representations which were being made by the Manchester Corporation to the larger County Boroughs throughout the Kingdom, in favour of the payment of Medical Practitioners, called in to assist midwives, through the Sanitary Authority rather than through Boards of Guardians. The Association was asked to endorse this policy, by making representations through its Divisions to the County Boroughs whom the Manchester Corporation had approached. This action of the Corporation being entirely in accordance with the already declared policy of the Association, a circular was issued to the Divisions urging them to give support on this point, whilst guarding themselves from being understood to approve the scale of fees suggested by the Manchester Corporation. Several Divisions have so approached their Borough Councils.

OPHTHALMIA NEONATORUM.

91. The Council at its Meeting in October adopted the following Recommendations of the Ophthalmia Neonatorum Committee, and took the necessary action to carry them into effect :—

> (*a*) That the Local Government Board be urged to take all steps in its power with a view to Ophthalmia Neonatorum being made compulsorily notifiable, and that the Divisions of the Association be requested to urge this upon the Local Authorities.
>
> (*b*) That the Divisions of the Association be urged to use every effort to secure the carrying out of the suggestions contained in paragraphs (*b*), (*c*), (*d*) and (*f*) of the Recommendations as finally approved.
>
> (*c*) That representations be made to the Central Midwives Board and Privy Council, by deputation if necessary, that the presence of purulent vaginal discharges should be included by the rules of the Midwives Board among the conditions for which medical help should be summoned.
>
> (*d*) That all necessary steps be taken to secure the periodical distribution of the circular to Midwives, on the subject of Ophthalmia Neonatorum, which the Central Midwives Board has prepared.
>
> (*e*) That the reference to the Special Ophthalmia Neonatorum Committee be discharged, and that it be referred to one of the Standing Committees of the Association to give effect to the recommendations now approved.

92. As regards the third Recommendation, it has been ascertained that the Central Midwives Board has already taken steps to alter its Rules in the manner indicated, and the alteration will come into effect at the end of this year.

Gratuitous Treatment.

93. The opinion of the Representative Meeting on the subject of the gratuitous treatment of Ophthalmia Neonatorum (Minute 185) has been noted for the guidance of the Council.

Local Arrangements for Treatment.

94. Since the last Representative Meeting Ophthalmia Neonatorum has been made a notifiable disease in the Potteries Towns, and a scheme was drawn up by a Special Committee of the North Staffordshire Division acting in co-operation with the Central Executive, whereby the interests of the local practitioners should be safeguarded in accordance with Minute 185 of the Representative Meeting at Belfast, namely :—

> That, in the matter of the treatment of Ophthalmia Neonatorum, this Meeting expresses the view that the Public Authorities should not be relieved at the expense of the charitable and of the medical profession of duties which appropriately belong to such public authority.

95. Consideration of the scheme submitted by the North Staffordshire Division led to the adoption by the Council of a Model Scheme, for the guidance of Divisions in whose areas Ophthalmia Neonatorum is made a notifiable disease.

PREVALENCE OF TRACHOMA.

96. On the suggestion of the Section of Ophthalmology at Belfast the Council has drawn the attention of the Local Government Boards and Boards of Education of the United Kingdom to the prevalence of Trachoma amongst the lower classes, to its effects on the sight, to its contagious nature, and to the importance of preventing the contagion of the inmates of the Institutions under the control of these Boards.

UNQUALIFIED PRACTICE—APPOINTMENT OF ROYAL COMMISSION.

97. In considering the action to be taken under Minute 116 of the Representative Meeting, by which the Council was instructed to approach the Government with a view to the appointment of a Royal Commission to inquire into the effects of unqualified practice, it has been necessary to have regard to the representations already made by the General Medical Council to the Government on this subject, and to the action subsequently taken by the Government. The Privy Council, in co-operation with the Local Government Board, addressed inquiries to the Medical Officers of Health as to the prevalence of unqualified practice in their respective districts, and the Home Secretary, in reply to a question in the House, indicated that no action would be taken by the Government until the results of such inquiries were ascertained. These results are not yet announced, but having before it evidence of the very imperfect character of

the Government inquiry thus carried out, the Council has decided to undertake an independent inquiry through the machinery of the Association. The Council believes that if properly carried out, such an inquiry must afford evidence which will satisfy the public, as well as the Government, of the need for action to remedy the defects of the existing medical law. Attainment of this result must, however, depend mainly upon the extent to which the Divisions and the individual members of the Profession are prepared to render their indispensable assistance.

THE MEDICAL PROFESSION AS A CAREER.

98. The question of the desirability of drawing the attention of Head Masters of Schools to the overcrowded state of the Medical Profession is under consideration.

CONDITIONS OF SERVICE OF PATHOLOGISTS AND BACTERIOLOGISTS.

99. The conditions of service of Pathologists and Bacteriologists attached to public institutions and bodies, referred by the Representative Meeting to the Council (Minute 172) are still under consideration.

INSTRUCTION IN HYGIENE.

100. With reference to the following motion before the Annual Representative Meeting, referred to the Council for Report—

Minute 275.—That, in view of the large sums of public money paid to those who give technical instruction in agriculture and various trades, of the cost to the community of the maintenance of hospitals and sanatoria for the treatment and cure of disease, much of which is preventable, and of the recognition by the Legislature of public health lectures as a part of technical education, qualified for a share in the local grants, the services of members of the medical profession in giving instruction in hygiene should no longer be treated as a matter of philanthropy; that medical practitioners should not lecture gratuitously for philanthropic societies such as the Women's National Health Association, which, while deserving of sympathy and encouragement, afford, by their existence, evidence of the neglect by the Government, central and local, in matters of sanitation and public health; but that such societies should co-operate with the county councils in the selection of lecturers who should be remunerated in part at least from public funds;

Recommendation.

101. The Council recommends:

That Members of the Medical Profession should be suitably remunerated for teaching subjects in connection with the Public Health, such as Nursing, First Aid to the Injured, and Hygiene, and that the fee adopted by the London County Council of £1 1*s.* for each Lecture is one which appears suitable for general adoption.

AMBULANCE INSTRUCTION.

102. On several occasions during the past few years questions have arisen as to the proper attitude to be observed by Members of the Association as regards instruction and examination in Ambulance Work. The question was raised in an acute form during the past session by the operations of the Red Cross Society and the St. John Ambulance Association. In connection with the scheme of Voluntary Aid Detachments, these Societies were endeavouring, in some parts of the country, to persuade medical practitioners to supply gratuitously the instruction necessary to qualify for admission to the Voluntary Aid Detachments. The Council expressed the opinion, which was specially circulated to the Divisions,

That, in the opinion of the Association, no medical man should be expected to give instruction in First Aid and Field Nursing without suitable remuneration, but that officers in command of Voluntary Aid Detachments should keep their Detachments efficient without remuneration.

At the same time, Divisions were asked what action they had taken to give effect to the decision of the Representative Meeting of 1905, that the time had now arrived when Ambulance Work should be treated as a matter of business and not of philanthropy. A special report will be made when a sufficient number of replies from the Divisions has been received.

SPIRITUAL HEALING.

103. The investigation, reported to the Representative Meeting of last year, into the matter of "Spiritual Healing" has not made rapid progress. The Council hopes, however, soon to be in a position to report.

MEDICAL MOTORISTS AND DUTY ON PETROL.

104. In accordance with the promise given by the Chancellor of the Exchequer to the Deputation of medical practitioners who waited upon him on July 1st, 1909, as reported to the Belfast Representative Meeting, a proviso was introduced into the Finance Bill whereby a rebate of one-half of the duty was to be allowed to medical practitioners in respect of Petrol consumed in motor cars when in use for professional purposes.

PROPOSED CONFERENCE WITH THE BRITISH PHARMACEUTICAL CONFERENCE UPON THE QUESTION OF DISPENSING BY MEDICAL PRACTITIONERS.

105. The President of the British Pharmaceutical Conference having approached the Association with regard to the holding of a Conference between the two bodies for the purpose of discussing the various aspects of the question of dispensing by medical practitioners, arrangements have been made for such a Conference to be held on May 19th, 1910.

GRATUITOUS TREATMENT OF HOSPITAL PATIENTS IN INDIA.

106. The Council has drawn the attention of the Secretary of State for India to the objections from the standpoint of both the Profession and the Public to a recent Order issued by the Government of Madras, to the effect that the medical services of Hospitals are to be placed at the disposal of all members of the community irrespective of means or social position.

QUESTIONS TO PARLIAMENTARY CANDIDATES.

107. In view of the recent General Election the Memoranda and Questions to Parliamentary Candidates were revised and issued to the Divisions, with a request that they should bring them before the notice of their local Candidates.

108. Information has been received that 69 Divisions approached the local Candidates and a large number of the replies of these gentlemen were forwarded and are being classified for future use. The work done by some of the Divisions in approaching, and in many cases personally interviewing Candidates, cannot fail to be of advantage to the Parliamentary work of the Association.

109. A special letter was sent to the Medical Candidates for Parliament, and a report of their answers was published in the BRITISH MEDICAL JOURNAL, January 15th, 1910, p. 165.

RATING OF A SURGERY UPON THE BASIS OF A PLACE OF BUSINESS.

110. In October last a Member of the Association asked whether the Association would assist him in the matter of the increased assessment of his house, which, though the rental was only £42, had been assessed for rating at £44 instead of as formerly at £33.

111. From inquiries made, the action in this case appeared to be part of a definite scheme of the local Assessment Authority to raise the rating of all doctors' houses, on the ground that they should be assessed upon the same basis as shops. If successful in one district, such a system would undoubtedly spread throughout the country. The Solicitor of the Association was accordingly instructed to take the case up, on behalf of the member, as one affecting the general interest of the profession. Notice was given of

appeal to Quarter Sessions, whereupon the Assessment Committee withdrew from its position and agreed as follows :—

(*a*) That the assessment should be restored to the original amount.

(*b*) That the difference between the rates paid, under protest, on the higher assessment, and those which would have been paid in the ordinary way, be refunded to the medical practitioner concerned.

(*c*) That the Assessment Committee pay ten guineas towards the costs incurred by the Association.

ACTION TAKEN IN REGARD TO CERTAIN RESOLUTIONS OF THE ANNUAL REPRESENTIVE MEETING, 1909.

112. The Resolutions of the Annual Representative Meeting on the following subjects have been noted as Declarations of Policy for the guidance of the Council :—

Employment of Medical Inspectors of School Children under the guise of Assistant Medical Officers of Health (Minute 62).

Systems of Payment of School Medical Officers (Minutes 64–67).

Duties of School Nurse (Minutes 72–74).

Treatment of School Children found Defective (Minutes 79, 80, 81, 86, 87, 88, 94, 95).

Security of Tenure for School Medical Officers (Minutes 97, 98).

Representation of the Association on the Central Midwives Board (Minute 105).

Gratuitous Treatment of Ophthalmia Neonatorum (Minute 185).

PUBLIC HEALTH AND POOR LAW.

WHOLE-TIME MEDICAL OFFICERS OF HEALTH.

113. The Council has noted for its guidance the declaration of policy of the Association contained in the following Resolution adopted by the Annual Representative Meeting at Belfast on the recommendation of the Council :—

Minute 234.—That, in the interests of the public health and in view of the multiplicity of duties thrown upon medical officers of health by recent enactments, it is desirable that, in future appointments, medical officers of health should be required to devote their whole time to the duties of their office, and be debarred from private practice, except as consultants ; that they should be adequately paid, and, if necessary, districts should be grouped for the purpose ; and that it is further desirable that medical officers of health should be protected in carrying out their duties, and be secured from capricious dismissal or reduction of salary, and that they be allowed to participate in any superannuation scheme approved by a Local Government Board.

114. In view of correspondence which appeared in the BRITISH MEDICAL JOURNAL, and other communications which apparently arose from a misunderstanding of the meaning of the foregoing Resolution, the Council, in January, resolved that it be pointed out for the information of members generally, (*a*) that the Association has uniformly supported in disputes with local authorities individual Medical Officers of Health, whether part-time or whole-time officers ; (*b*) that the intention of the Association had been uniformly expressed in favour of the continuance in office of the present holders of part-time appointments, subject to the exigencies of the public Service ; and (*c*) that the term "future appointments" contained in Minute 234 was understood by the Council to apply only in case of voluntary retirement of the present holders of appointments.

115. Having regard to the Resolution of the Representative Meeting in favour of the system of appointment of Medical Officers of Health to give their whole time to the duties of the office, and having reason to believe that a Bill to provide security of tenure of office for all officers would meet with considerable opposition in Parliament, the Council has redrafted the Public Health Officers Bill of the Association The Bill now provides that Medical Officers of Health giving their whole time to the service shall not be appointed for a limited period only, and shall only be removable with the consent of the Local Government Board, and that the Local Government Board may insist upon the same terms of appointment for part-time Medical Officers of Health in cases where the Board, in the public interest, shall deem it desirable.

HOUSING AND TOWN PLANNING ACT.

116. The progress of the Housing and Town Planning Bill through both Houses of Parliament was carefully watched on behalf of the Association, and action taken, as opportunity offered, to secure the adoption of provisions satisfactory to the Profession in those matters in which it is specially concerned. An attack was made on the principle of security of tenure, even as regards County Medical Officers of Health, but was successfully resisted. The Association endeavoured to amend the Bill by providing that Borough and District Medical Officers of Health, as well as County Medical Officers, should be removable only with the consent of the Local Government Board, and that none of these Officers should be appointed for a limited period only. The efforts of the Association were unsuccessful, but the opposition was based upon technical grounds of Parliamentary procedure only, and the Council has reason to believe that the precedent afforded by the Housing and Town Planning Act as regards County Medical Officers will afford material assistance towards securing similar protection for District Medical Officers of Health. The Council desires to record the indebtedness of the Association to Lord Harrowby and Lord Lytton, and to Sir Walter Foster and Mr. G. N. Barnes, and other Members of the House of Commons, for their assistance in connection with this matter.

POSTAL OFFICIALS AND VACCINATION.

117. Attention was called by the Postal Medical Officers Association to a Circular issued by the Postmaster-General announcing that in future Candidates for employment who have conscientious objection to re-vaccination may be allowed exemption by making a statutory declaration that they conscientiously believe that re-vaccination would be prejudicial to their health.

118. Representations were made by the Council to the Postmaster General of the regret with which the Association had heard of the relaxation in a public Department of preventive measures against such a serious disease as small-pox.

ACTION TAKEN WITH REGARD TO PUBLIC HEALTH AND POOR LAW APPOINTMENTS.

119. Action has been taken by the Council with regard to the following public appointments :—

Newcastle-on-Tyne (Public Vaccinators), Hampstead (Public Vaccinators), Lutterworth (Poor Law Medical Officer), Sudbury (Poor Law Medical Officer and Public Vaccinator), Whitechapel (Poor Law Infirmary Medical Superintendent), Dundonald (Parish Medical Officer of Health), Salford (Poor Law Hospital appointment), Partick (Medical Officer of Health), Lanark (Assistant Medical Officer of Health), Northampton (Assistant Medical Officer of Health), Great Yarmouth (Assistant Medical Officer of Health), Newcastle-under-Lyme (Medical Officer of Health), Paisley (Assistant Medical Officer of Health), and Ilkeston (Assistant Medical Officer of Health and School Medical Officer).

SALARY OF WHOLE-TIME ASSISTANT MEDICAL OFFICERS OF HEALTH.

120. The Resolution of the Annual Representative Meeting at Belfast (Minute 225) as to the minimum salary of Whole-time Assistant Medical Officers of Health has been noted as a Declaration of the Policy of the Association, and effect has already been given to it.

POOR LAW REFORM.

121. In June last the Council appointed a Special Committee to consider the Reports of the Royal Commission on the Poor Law as affecting the Medical Profession, and to

report thereon, with Recommendations as to any action which should be taken by the Association.

122. The Committee has held frequent meetings, and has had the advantage of hearing the views of the Poor Law Medical Officers Association and of the Infirmary Medical Superintendents Society, expressed by Deputations. An Interim Report was issued to the Divisions and appeared in the Supplement to the BRITISH MEDICAL JOURNAL of February 5th, 1910.

123. The Council has urged upon the Government the desirability of appointing a Departmental Committee for the consideration of the organisation of medical assistance, as a separate problem, and specially the co-ordination of the various agencies now administering medical assistance. It was also suggested that the British Medical Association should be represented on any Committee appointed to consider this matter. The Home Secretary, to whom this communication was referred by the Prime Minister, has informed the Council that the matter is under consideration and that a further reply will shortly be sent.

124. It is hoped to issue a further Interim Report at a date which will allow its being taken into consideration by the Divisions before its discussion in the Annual Representative Meeting.

HOSPITALS.

PAYMENT FOR COMPENSATION CERTIFICATES.

125. The Representative Meeting decided (Minute 148) that any member of an honorary or paid medical or surgical staff of a hospital who signs a certificate for, or gives a report on, any case under the Workmen's Compensation Act ought to receive personally the usual fee in full. The Meeting further instructed the Council to report on the amount of such fees.

Recommendation.

The Council recommends :—

That the fee for a certificate of the kind referred to in Minute 148 of the Representative Meeting, 1909, should not be less than one guinea.

KING'S COLLEGE HOSPITAL.

126. With the object of giving effect to Minute 171 of the Annual Representative Meeting at Belfast, the Hospitals Committee, by instruction of the Council, has conferred with the South London Hospitals Committee and with the Medical Committee of King's College Hospital on the subjects referred to in the Resolution of the Meeting. A Report of the result of the negotiations cannot as yet be submitted, but it is hoped to include it in the Supplementary Report of the Council.

HAMPSTEAD GENERAL HOSPITAL.

127. The negotiations which were in progress at the last Annual Representative Meeting, with a view to the settlement of the difficulties between the Council of the Hampstead Hospital and the local profession, were continued by the Hospitals Committee, but it was eventually found impracticable to arrive at any decision while certain ethical questions were pending. When these had been disposed of, as stated in paragraph 64 of the Report, a Sub-Committee of the Hospitals Committee met in conference members of the Staff of the Hospital, but the intervention of the Central Executive on the matter then ceased, owing to the receipt of an intimation from the Division that they proposed to negotiate directly with the Council of the Hospital.

BARRY MUNICIPAL HOSPITAL.

128. The questions of staffing of the Barry Municipal Hospital, upon which the Association was applied to by the local Medical Profession and by the District Council to advise, and which were under consideration at the time of the Representative Meeting at Belfast, have been settled during the year. The principle of employment of the local general practitioners, acting on a rota, as the Staff of the Hospital has been accepted by the District Council, and the Council has agreed to pay such practitioners for their services. The arrangement arrived at is that four medical practitioner, shall be on duty at one time, serving for a period of three months. Each practitioner is paid £10 for each three months' period of service. This rate, though lower than the local practitioners or the Association consider satisfactory, has been accepted for the time being, in order to give the new system a trial.

UNITED KINGDOM HOSPITALS CONFERENCE.

129. The Council reported to the last Representative Meeting the difficulties which had prevented the convening of another United Kingdom Hospitals Conference, but expressed the belief that, through the re-organisation of the Hospitals Association, these difficulties might be overcome. Information has now been received that the Hospitals Association has been re-organised under the title of the "British Hospitals Association," upon what it is hoped may be a permanent basis, as a body representative of those who are engaged in the actual administration of Hospitals. The British Hospitals Association proposes to hold an annual Conference, and has expressed its desire to confer with representatives of the British Medical Association, when opportunity may offer, upon subjects of Hospital Management which are of interest both to the administrative authorities of Hospitals and to the Medical Profession.

RESOLUTIONS OF ANNUAL REPRESENTATIVE MEETING, 1909.

130. The following Resolutions of the Annual Representative Meeting have been noted as Declarations of Policy for the guidance of the Council :—

Certificate of Suitability for Hospital Treatment (Minute 141).

Definition of "Nursing Home" (Minute 142).

Fresh Public Medical Institutions (Minutes 150–2).

Representation of local medical profession on Boards of Hospitals and similar bodies (Minute 157).

Contributions to Hospitals by Employers of Labour and by Employees (Minute 159).

NAVAL AND MILITARY.

FEES PAYABLE BY NATIVES TO OFFICERS OF THE INDIAN MEDICAL SERVICE.

131. It was reported to the last Representative Meeting that representations had been made to the Government that the Order of 1st July, 1907, restricting the fees payable by natives to Officers of the Indian Medical Service without previous consent of the Government was oppressive and unnecessary. No reply other than a formal acknowledgment being forthcoming, Mr. J. D. Rees, M.P., was approached, and kindly asked questions in the House bearing upon the matter, The Secretary of State for India having replied that he was still in communication with the Government of India, the Council asked that pending the settlement of the questions which have arisen between the India Office and the Government of India, the Notification in question might be suspended. This request has been referred by the Secretary of State to the Government of India.

THE MEDICAL DEPARTMENT OF THE TERRITORIAL FORCE.

Territorial Forces Committee.

132. In view of the importance of the questions arising in connection with the Medical Department of the Territorial Forces, the Council at its meeting in October appointed a

new Special Committee, called the Territorial Forces Committee, to consider and report on these matters. On its advice, the Council passed the Resolution already shown on page 32 (paragraph 95).

Representation to War Office.

133. Representations have been made to the War Office in regard to the Staff of Instructors for Medical Units, the inadequacy of the Fee for medical examination of recruits, the payment of a Quartermaster for each General Hospital, the proper payment of Medical Officers when in Camp, various matters in relation to equipment of Medical Units, and the composition of the Territorial Advisory Council.

Representations to County Associations.

134. The following resolutions were forwarded to the County Associations :—

(i) That, in the opinion of the Association, it is desirable that Officers commanding General Hospitals should have a seat on the County Associations of the counties in which the hospitals are situated :

(ii) That, in the opinion of the Association, it is of urgent importance that each Medical Unit should be provided with its own Drill Hall.

The reception was most encouraging, and justifies the Council in believing that much useful work lies before the Association in connection with this branch of the Military Medical Service of the Crown.

SCOTLAND.

STATE REGISTRATION OF NURSES.

135. The question of State Registration of Nurses as affecting Scotland has received the attention of the Scottish Committee during the past year. The Council approved that steps should be taken to secure the recognition of the following principles in any Bill supported by the Association, and they were incorporated in the Bill approved by the Conference in which the Association was represented (*see* paragraph 84, page 272) :—

(*a*) That there should be a uniform system of Registration throughout the kingdom.

(*b*) That there should be a separate Scottish Council to control the Registration of Nurses in Scotland.

(*c*) That the recognition of the Institutions for training, and the conduct of the examinations should be under the control of the Scottish Executive Council.

REPORT BY ROYAL COMMISSION ON FEEBLE-MINDED.

136. Arrangements have been made to press upon the Government certain matters with reference to the Amendments of the Lunacy Law which are not included in the Recommendation of the General Board of Lunacy.

MEMORANDUM ON MEDICAL INSPECTION OF SCHOOL CHILDREN.

137. A Memorandum on Medical Inspection of School Children and the Treatment of those found Defective, with special reference to Scottish conditions, has been circulated to the Scottish Branches and Divisions.

ROYAL COMMISSION ON THE POOR LAWS.

138. The Report on Scotland of the Royal Commission on the Poor Laws is receiving the consideration of the Committee.

IRELAND.

IRISH REPORT OF ROYAL COMMISSION ON POOR LAWS.

139. The Irish Report of the Royal Commission on the Poor Laws has been fully considered by the Irish Committee, and the Committee has issued a circular to all Poor Law Medical Officers in Ireland in order to ascertain their opinion on certain specific questions.

DAIRIES, COWSHEDS, AND MILKSHOPS (IRELAND) ORDER, 1908

140. The Veterinary Medical Association of Ireland requested the opinion of the Association as to whether medical practitioners should accept the office of Inspectors under the Dairies, Cowsheds, and Milkshops Order. The matter was referred to the Irish Committee which decided that some of the duties could be most efficiently carried out by a Veterinary Surgeon, but that as part of the duty of the Medical Officer of Health in each district is to supervise all the buildings, &c., in his district, the latter officer should in all cases be the supreme officer, the Veterinarian sending his reports through the Medical Officer of Health ; also, that the duties of the Veterinarians appointed under the Order should be defined by the Local Government Board.

THE BRANCHES OUTSIDE THE UNITED KINGDOM.

MEDICAL REGISTRATION.

(*a*) *In Australia and South Africa.*

141. Representations have been made to the New South Wales Branch and to the South African Branches as to the advisability of their taking the line of the other Dominions so far as Medical Registration is concerned.

(*b*) *In Sierra Leone.*

142. The Colonial Secretary has been asked by the Council to take steps to bring the Medical Ordinance for Sierra Leone into harmony with Ordinances in force in other British Dependencies. The Sierra Leone Ordinance, unlike the Medical Ordinances of most British Dependencies, merely provides for a penalty for the wrongful assumption of title, and does not forbid, under penalty, the practice of Medicine by unqualified persons.

(*c*) *In India.*

143. The question of adopting a Medical Act for India, which is arousing considerable interest in that country, is receiving the attention of the Council.

SCOPE OF WORK OF THE COLONIAL COMMITTEE.

144. The possibility of widening the scope of the Colonial Committee and bringing it into closer relationship with the Branches outside the United Kingdom is at present under consideration. It is proposed to hold a Conference at the time of the Annual Meeting, between the Committee and representatives of Colonial Branches attending the Annual Meeting.

The Executive Committee of the Annual Meeting has kindly undertaken the organisation, if practicable, of a Dinner at which Members of the Association from the Dominions beyond the Seas may meet Members of the Central Executive of the Association.

EDMUND OWEN,
Chairman of Council.

17th May, 1910.

APPENDIX.

LIST OF MATTERS REFERRED TO THE COUNCIL BY THE ANNUAL REPRESENTATIVE MEETING AT BELFAST, 1909.

Minute of A.R.M.	*Subject.*	*Para. of Report.*
20	Issue of Supplement to Non-Members ...	9
31	Advertisements in BRITISH MEDICAL JOURNAL	10–13
33	Accident Policy in connection with JOURNAL	15–20
35	Re-publication of Articles in Medical Journals	66
37	Recognition of a Special Class of Consultants	62–63
38–9	Report on Ethics of Consultation ...	64
40A	Position of Practitioners examining on behalf of interested persons	67
56	Definition of duties of Financial Secretary and Business Manager and of Medical Secretary	14
59	Resolutions of Representative Meeting involving Special Expenditure... ...	21
62	Employment of Medical Inspectors of School Children under the guise of Assistant Medical Officers of Health ...	112
64–7	Systems of Payment of School Medical Officers	112
72–4	Duties of School Nurse in connection with Inspection and Treatment ...	112
79	Reference of School Children to Medical Charities	81–82
80–1	Treatment of School Children	83 & 112
83–95 97–98	Security of Tenure for School Medical Officers	112
99–100 103–4	Action of London County Council with regard to Treatment of School Children at Hospitals	81–82
105	Representation of the Association on the Central Midwives Board	88
114	Nurses' Registration (Scotland)	84
115–6	Proposed Royal Commission on effects of Unqualified Practice	97
117–8	Comprehensive Public Medical Service ...	74
119	Contract Practice (Resolutions on) ...	75
128, 129	Rules of Nursing Association	85–87
131	Circular to Head Masters of Schools on the Medical Profession as a Career ...	98
132	Subsidizing Midwives	89
141	Certificates of Suitability for Hospital Treatment	130
142	Definition of Nursing Home	130
145, 220	United Kingdom Hospitals Conference...	129
148–9	Payment for Compensation Certificates...	125
150–2	Fresh Public Medical Institutions ...	130
157–8	Representation of Local Medical Profession on Boards of Hospitals and similar Bodies	130
159	Contributions to Hospitals by Employers of Labour and by Employees	130
169	Hampstead Hospital Dispute ...	69–70 & 127
171	King's College Hospital	126
172	Conditions of Service of Pathologists and Bacteriologists	99
177–8, 180, 190	Ophthalmia Neonatorum Report... ...	91–92
185	Treatment of Ophthalmia Neonatorum by public authorities	93–95
194–5	Method of Distribution of Capitation Grants	37
197	Organisation of Medical Students ...	49–50
198	Provision of Official Maps	54
199	Affiliation of kindred Associations ...	54
200	Addresses to Medical Students	48
207, 210, 212–3, 216–7	Application for Royal Charter	51–53
225	Salary of Whole-time Assistant Medical Officer of Health	120
234	Whole-time Medical Officers of Health	113–115
238	Representatives of Divisions at Sections of the Annual Meeting	60
240	Hours of Admission to Library	57
242	Provision of Central Research Laboratory	55
248	Proposed Materia Medica Committee ...	56
260, 265	Amendment of Existing By-laws ...	42–43
271	Promulgation of Policy of the Association	54
272–4	Federated Societies' Medical Benefit Association	73
275–7	Instruction in Hygiene and similar subjects	100–101
278	Proposed Amendment of Regulations as to Election of Representatives in the Representative Meeting	40–41

Association Notice.

ELECTION OF CENTRAL COUNCIL 1910-11.

NOTICE is hereby given that nominations of candidates for election of Members of Council by Branches or groups of Branches in the United Kingdom by voting papers for the year 1910-11 must be forwarded to reach the Financial Secretary and Business Manager, at the Office of the Association, not later than Monday, May 23rd, 1910, and that each nomination must be on the prescribed form, copies of which will be furnished by the Financial Secretary and Business Manager upon application.

Separate forms have been prepared for a nomination by a Division and for a nomination by any three Members respectively, and those applying are requested to state for which purpose the form is desired.

Voting papers containing the names of all candidates duly nominated will be issued from the Central Office on Saturday, June 11th, and will be returnable not later than Saturday, June 18th.

By Order of the Council,

GUY ELLISTON,

Financial Secretary and Business Manager.

April 28th.

Association Intelligence.

PROCEEDINGS OF COUNCIL.

AT a Meeting of the Council held at 429, Strand, London, W.C., on Wednesday, April 27th, 1910, at 2 o'clock in the afternoon,

Present:

Mr. EDMUND OWEN, LL.D., D.Sc., London, Chairman of Council, in the Chair.

Mr. H. T. BUTLIN, P.R.C.S., D.C.L., LL.D., London, President-elect.

Dr. SINCLAIR WHITE, Sheffield, Past-President.

Mr. H. A. BALLANCE, Chairman of Representative Meetings.

Dr. EDWIN RAYNER, Stockport, Treasurer.

Dr. FORD ANDERSON, London
Dr. GRANT ANDREW, Glasgow
Inspector - General ROBERT BENTHAM, R.N., ret., London (Representative of Royal Navy Medical Service)
Dr. W. A. CARLINE, Lincoln
Mr. ANDREW CLARK, D.Sc., London
Mr. J. WARD COUSINS, Portsmouth
Dr. EDWARD CURETON, Shrewsbury
Dr. JAMES DAVISON, Bournemouth
Mr. E. J. DOMVILLE, Exeter
Mr. A. J. DREW, Oxford
Mr. G. YOUNG EALES, Torquay
Dr. GEORGE EDMOND, Aberdeen
Dr. DAVID EWART, Chichester (New Zealand Branch)
Mr. J. H. EWART, Eastbourne
Dr. A. C. FARQUHARSON, Bishop Auckland
Mr. C. E. S. FLEMMING, Bradford-on-Avon
Dr. H. A. FRANCIS, London (Brisbane and Queensland Branch)
Mr. T. W. H. GARSTANG, Altrincham
Dr. DAVID GOYDER, Bradford
Dr. T. D. GREENLEES, London (Cape of Good Hope, Eastern Province; Cape of Good Hope, Western Province; and Border Branches)
Dr. WILLIAM HALL, Lancaster
Dr. G. E. HASLIP, London
Sir VICTOR HORSLEY, F.R.S., London
Dr. R. MCKENZIE JOHNSTON, Edinburgh
Mr. R. J. JOHNSTONE, Belfast
Mr. HERBERT JONES, Hereford
Mr. HUGH R. KER, London
Mr. R. H. KINSEY, Bedford
Mr. F. C. LARKIN, Liverpool
Mr. ALBERT LUCAS, Birmingham
Dr. J. A. MACDONALD, Taunton
Dr. CHARLES MACFIE, Bolton
Dr. D. J. MACKINTOSH, M.V.O., Glasgow
Dr. EWEN J. MACLEAN, Cardiff
Dr. HERBERT MANLEY, West Bromwich
Dr. C. J. MARTIN, F.R.S. London (Sydney and New South Wales Branch)
Dr. J. M. MASON, London (New Zealand Branch)
Dr. J. MUNRO MOIR, Inverness
Dr. C. G. D. MORIER, London (South Australian and West Australian Branches)
Dr. C. H. MILBURN, Hull
Dr. T. G. NASMYTH, Edinburgh
Dr. B. H. NICHOLSON, Colchester
Dr. F. M. POPE, Leicester
Dr. H. JONES ROBERTS, Penygroes
Mr. W. ST. A. ST. JOHN, Derby
Dr. CECIL E. SHAW, Belfast
Dr. LAURISTON E. SHAW, London
Lieutenant-Colonel R. J. S. SIMPSON, C.M.G., London (Griqualand West, Natal, and Transvaal Branches)
Dr. W. MITCHELL STEVENS, Cardiff
Mr. C. R. STRATON, Wilton
Dr. J. H. TAYLOR, Salford
Dr. D. F. TODD, Sunderland
Dr. ALEXANDER TROTTER, Perth
Mr. T. JENNER VERRALL, Brighton
Professor A. H. WHITE, Dublin
Mr. D. J. WILLIAMS, Llanelly
Lieut.-Colonel E. M. WILSON, C.B., C.M.G., South Farnborough (Representative of the Army Medical Service)

MINUTES.

The Minutes of the last Meeting were amended in accordance with notice given, and confirmed as so amended.

APOLOGIES.

Read letters of apology for non-attendance from the President, Dr. Buist, Professor Corby, and Colonel Joubert de la Ferté.

DEATHS.

The CHAIRMAN OF COUNCIL reported the deaths of Mr. H. J. Manning, Lieutenant-Colonel Boileau, and Dr. Whitehead Reid, and was requested to forward letters of condolence to the families of the deceased gentlemen.

HAMPSTEAD HOSPITAL.

Upon consideration of a communication from the Council of the Metropolitan Counties Branch, the Council decided that the documents which were before the Council on January 26th, when the decision with reference to the Hampstead Hospital case was arrived at, should be circulated to the Representatives in the Representative Meeting.

PRESIDENTIAL BADGE.

Dr. FORD ANDERSON, President of the Metropolitan Counties Branch, reported that the Branch Council proposed to commemorate the holding of the Seventy-Eighth Annual Meeting of the Association in London by presenting to the Association, on behalf of the Metropolitan Counties Branch, a Presidential Badge of Office to be worn by each successive President on ceremonial occasions.

SECTION OF ANAESTHETICS.

A letter from Dr. F. W. Hewitt, M.V.O., President of the Section of Anaesthetics, was referred to the Special Chloroform Committee with the request that the Committee submit its Report to the Council at the Meeting on June 29th, and that Dr. Hewitt be informed that in this way it will be included in the Supplementary Report of Council which will be published in the JOURNAL early in July.

BRITISH MEDICAL BENEVOLENT FUND.

A letter from the British Medical Benevolent Fund, expressing its thanks to the Association for continuing to collect money on behalf of the Fund, was ordered to be entered on the Minutes.

LISTER INSTITUTE.

A letter from the Assistant Secretary of the Lister Institute, asking the Association to appoint a Representative on the Council of the Institute, was referred to the Science Committee.

JOURNAL AND FINANCE COMMITTEE.

The TREASURER presented the Minutes of the Journal and Finance Committee of April 20th, 1910.

The Financial Statement for year ending December 31st, 1909, as certified by the auditors, was approved, and, in accordance with By-law 35, was ordered to be presented to the Annual General Meeting and the Annual Representative Meeting (see p. 249).

The accounts for the quarter ending March 31st, amounting to £12,561 10s. 1d., were received and approved, and the Treasurer was empowered to pay those remaining unpaid, amounting to £3,357 1s. 3d.

A grant of £2,000 was voted towards defraying the expenses of the London Meeting, 1910, £1,000 to be available on application by July 1st, and the balance by August 2nd. In the event of certain contingencies, it is understood that the sum by which the grant exceeds the surplus shall rank for a *pro rata* return in the same manner as the subscriptions collected by the Local Executive Committee from the Metropolitan Counties Branch.

The remainder of the Minutes were approved.

ORGANIZATION COMMITTEE.

Mr. ANDREW CLARK presented the Report of the Organization Committee of April 5th and 20th, 1910.

The Council expressed its approval of the principle that a Branch Council should be responsible for reviving the work of the Association in the area of an inactive Division, pending reorganization, and that Branches be advised to incorporate a provision in their Rules accordingly.

The Council approved the forms of nomination paper for use in connexion with the election of Members of Council by the Branches in the United Kingdom by Voting Paper. All nominations are required to be on the prescribed forms.

The following scheme of dates for the year 1910 was

adopted for the election by voting paper of Members of Council by Branches in the United Kingdom:

Date when announcement as to receiving nominations should appear in the JOURNAL	April 30th.
Last day for receipt of nominations ...	May 23rd.
Day of issue of voting papers from Central Office	June 11th.
Last day for receipt of voting papers at Central Office	June 18th.
Announcement of result in JOURNAL ...	July 2nd.

In lieu of the former grouping of the Divisions of the Metropolitan Counties Branch, and the Bromley and Croydon Divisions of the South-Eastern Branch, for the election of four Members of the Central Council, 1910–11, it was decided that they should constitute a single group electing four Members, and that the election of those Members should be conducted by the method of the single transferable vote.

The Organization Committee was authorized to take, on behalf of the Council, any action necessary in connexion with the election of Members of Council by Branches outside the United Kingdom.

The Council laid down the following provisions for the election of Members of Council by the grouped Representatives for the year 1910–11, and recommend the Representative Meeting to adopt the same as the Standing Orders to govern subsequent elections:

1. That the election take place at the time of the Annual Representative Meeting.
2. That a nomination for a Member of Council to be elected by any group of Representatives be required to be made by a Division or a Representative of a Division included in the group.
3. That nominations be required to be on the Form contained in Appendix B to the Quarterly Report of the Organization Committee.
4. That nominations be received up to the end of the first hour of the third day's Session of the Annual Representative Meeting.
5. That there be issued to each Representative or Deputy Representative of a Constituency in the United Kingdom, in attendance at the Meeting, a voting paper containing the names of all Candidates duly nominated for election as Members of Council by the group to which such Representative belongs.
6. That the voting paper be in the form contained in Appendix C to the Quarterly Report of the Organization Committee.
7. That the voting papers be returned to the Medical Secretary within one hour from the commencement of the fourth day's Session of the Annual Representative Meeting.
8. That in the event of equality of votes the election be determined by the aggregate number of Members in the Constituencies represented by the voters for each Candidate as in the case of a card vote.
9. That the details of the voting be placed before, and verified by, the Chairman before being declared.

With reference to the Election of Representatives in Representative Meetings, the Council submits, for the consideration of the next Annual Representative Meeting, the proposal that each Constituency elect at least one Representative and (in the United Kingdom) an additional Representative for each 100 members after the first 50, and that on a card vote the voting power of a Constituency which has more than one Representative be equally divided among all the Representatives of that Constituency.

The Treasurer was authorized, in conference with the Chairman of the Capitation Grants Subcommittee, to make a Grant not exceeding 1s. per head to those Branches in the United Kingdom which appear to them to need the money, and have furnished Reports to the satisfaction of the Capitation Grants Subcommittee. The determination of the Annual Grants were deferred to the June Meeting of the Council.

The Grants to Branches outside the United Kingdom for the year 1910 are to be at the rate of 4s. for each Member on the Annual List.

A Supplementary Grant of £25 was made to the Hong Kong and China Branch for the development of the Library.

The Council decided to report to the Annual Representative Meeting that it regards the question of the formation of a Medical Students' Union as one of great importance, and considers it advisable to make further inquiries before submitting definite recommendations, and that it be recommended that the instruction contained in Minute 197 of the Annual Representative Meeting, 1909, be continued.

The Medical Secretary's Address to Divisions on Poor Law Reform as Affecting the Medical Profession will be reprinted in pamphlet form, after publication in the BRITISH MEDICAL JOURNAL, for the use of those Divisions which desire it.

Certain alterations in the Rules of the Cape of Good Hope, Eastern Province Branch, were approved.

A Branch of the Association is to be formed, designated the Baluchistan Branch, and composed of the Members of the Association resident within the area of the Baluchistan Agency.

The Council has granted independent representation to the Trowbridge Division, the Norwood Division, and the Greenwich Division. Otherwise the Divisions in the United Kingdom are provisionally grouped for representation in Representative Meetings for the year 1910–11, in the same manner as for the year 1909–10.

The Organization Committee was authorized finally to determine the grouping of Divisions in the United Kingdom as soon as possible after the information contained in the Annual List of Members is available.

The remainder of the Quarterly Report was approved.

The Council considered a communication received from the Privy Council relative to the application of the Association for a Royal Charter, and decided upon certain proposals to be submitted to a Special Representative Meeting and Extraordinary General Meeting. The Chairman of Representative Meeting, the Chairman of Council, and the Chairman of the Organization Committee were authorized to fix the dates of the Meetings, and to make all necessary arrangements.

The Council approved a form of Voting Paper as the Form to be used, subject to the exception hereinafter mentioned, for the election of Members of Council by Voting Papers in the United Kingdom. The Chairman of Council and the Chairman of the Organization Committee were authorized to sanction such modifications of the Form as may be necessary to meet the circumstances of exceptional cases.

The remainder of the Report was approved.

SCIENCE COMMITTEE.

Dr. POPE presented the Report of the Science Committee of April 2nd, 1910.

The Council approved the following report:—

That it is desirable that a Pronouncement should be made by the Association on the subject of Athleticism in Schools, as follows:

(1) A due amount of regular bodily exercise for each individual is one essential element in any complete scheme of education. The fitness, or otherwise, of a pupil to undertake and to benefit by exercise must always be largely determined by the conditions of his everyday life at school. In this connexion his diet, the times and arrangement of his meals, the nature, conditions, and duration of the mental work demanded of him, and the amount of healthy sleep secured to him, are all of vital importance.

(2) All the pupils of any school should be under the personal supervision of a single medical authority, whether this consists of the School Medical Officer or (as may be advisable in very large schools) of a Medical Board specially constituted to that end.

(3) Every boy should be subjected to a thorough medical examination by the School Medical Authority when he first enters the school. This may reveal obvious defects or disabilities in some instances, and in other cases may show the need for special observation during, at any rate, the earlier years of school life.

(4) A boy's fitness for physical exertion depends upon his physical and constitutional ability, and is not to be gauged merely by his age, which, taken by itself, is often a misleading criterion of strength and endurance.

(5) It is most desirable that a course of systematized physical training should be adopted for all boys in schools.

(6) Careful observation of the behaviour of the new and younger boys during their ordinary games, etc., and of the physical effects thus produced upon them individually, affords a valuable means of estimating the fitness of each for subsequently undertaking more strenuous exertion.

(7) It is most important that there should be an ample interval (one hour at least) between the end of a substantial meal and the beginning of strenuous exercise. There is clear evidence that the neglect of this elementary rule is responsible for a very large proportion of the evils which have been attributed to over-exertion alone. The nature, quality, and quantity of food, and hours of meals, require careful consideration and adjustment.

(8) Special caution is required in permitting a resumption of active exercise to convalescents—particularly after diphtheria, influenza (including "influenzal catarrhs"), rheumatism and measles, *and* during a period of rapid growth.

(9) Paper-chases, school and house runs should be distinguished from races; but so far as they include the element of competition, and, therefore, to some extent, the strain of racing, boys should be selected and grouped for a specified distance in accordance with their physical capacity. The plan of running all boys—the young and the older, the strong and the less vigorous—together, over the same distance, is not to be recommended. Whenever, for any reason, such a plan is adopted, special measures must be taken to ensure that the smaller and weaker boys are not called upon for excessive or too prolonged exertion.

Evidence, obtained from a great many schools, upon the results of long-distance races, shows that they very seldom entail risk, provided that the competitors are selected, and watched during practice with the care and precautions already indicated.

(10) Medical examination and skilled supervision are also needed in regard to rowing, boxing, and swimming. Competitions in long-distance diving and in long-distance swimming are dangerous for young adolescents.

(11) The above considerations as to periodical medical examination and careful individual supervision are equally applicable in the case of girls engaging in active exercises.

The British Medical Association, in making this Pronouncement, wishes gratefully to recognize the work previously done on this subject by the Medical Officers of Schools Association. This has been of the greatest assistance in preparing the present Pronouncement, which, to a great extent, embodies the Resolutions formulated by the Medical Officers of Schools Association and adopted in March, 1909.

The Council recorded its thanks for the great amount of care and labour expended by the Editor and the Librarian in the preparation of the Lending Department of the Library.

The remainder of the Report was approved.

CENTRAL ETHICAL COMMITTEE.

Dr. MACLEAN presented the Report of the Central Ethical Committee of April 8th, 1910.

The Report on the Position of Practitioners examining on behalf of Interested Persons was approved for issue to the Divisions, in accordance with Minute 40*a* of the Representative Meeting, 1909, and submission to the Representative Meeting, 1910, as an interim Report. A further Report will be issued after consideration of the replies from the Divisions.

The Council reports to the Representative Meeting that, after due consideration of the replies received from the Divisions, it is not advisable to proceed at present to the drafting of any Regulations to govern a Special Class of Consultants.

The Council considered and dealt with five cases of Members recommended for expulsion.

The remainder of the Report was approved.

MEDICO-POLITICAL COMMITTEE.

Dr. MACDONALD presented the Report of the Medico-Political Committee of April 6th and 13th, 1910.

The Council having considered Minute 275 of the Annual Representative Meeting, Belfast, will report to the Annual Representative Meeting that the Council recognizes the importance of duly qualified Lecturers being employed in the preparation of candidates for Voluntary Aid Detachments, and in the work included under the title of Public Health by Education Authorities, and is of opinion that, while Officers in command of Voluntary Aid Detachments should keep their Detachments efficient without remuneration, all other Members of the Profession should be suitably remunerated for teaching subjects in connexion with the Public Health, such as Nursing, First Aid to the Injured, and Hygiene, and that the fee adopted by the London County Council of £1 1s. for each Lecture is one which appears suitable for general adoption.

The Contract Practice Report of 1905 will be reprinted for issue to those requiring it, and when the reconsideration of the subject of Contract Practice is complete, 5,000 copies will be printed, containing such additional matter as the Medico-Political Committee may think desirable. The copies will be placed on sale at 1s. each.

The Annual Representative Meeting will be recommended to adopt the following Model Rules for District Nursing Associations in substitution for those approved by the Annual Representative Meeting, 1909, and to authorize that they be issued to Divisions as suitable for recommendation to District Nursing Associations for inclusion in their Rules:

1. The nurse shall in every case carry out the directions of the Registered Medical Practitioner in attendance.

2. The nurse, when requested in an emergency, may visit and render first aid to any person without awaiting instruction from a doctor.

3. If, in the nurse's opinion, the attendance of a doctor is necessary, she must insist that he be sent for; and if for any reason his services are not immediately available, she must, if the case be still one of urgency, remain with the patient and do her best until he arrive, or until the emergency is over.

Should the advice to call in a doctor be not acted upon, the nurse must at once leave and report the case to her Secretary, and must not attend again except in case of fresh emergency.

4. Should any further attendance be requested by the patient after the emergency is over, the nurse must explain that the doctor will decide whether or not this is necessary.

5. No attendance after a first visit shall be given by a nurse unless she has informed a doctor and received his instructions, if any, with regard to the case.

6. Apart from her duties as a certified midwife, a nurse must on no account prescribe or administer, on her own responsibility, such drugs for her patients as should only be prescribed by a medical man.

7. It is desirable to obtain the co-operation of all the medical men in the district, and in the larger Associations to obtain, if possible, the assistance of one or more of them on the Committee.

(Attention is drawn to the fact that the machinery of the local Divisions of the British Medical Association is available for this purpose.)

8. No midwife in the employment of a Nursing Association should accept an engagement without first asking the patient to state, and herself registering, the name of the doctor to be called in should any emergency arise.

9. A nurse shall in no case attempt to influence a patient in the choice of a doctor.

10. No person shall be employed by the..... Association as a midwife, or received for training as a midwife, without having first signed an agreement not to practise as a midwife within a radius of.....miles from.....within a period of .....after leaving the service of the Association, without the consent in writing of the Association.

Having regard to the urgency of the issue to the Divisions of the model scheme of the arrangements for the treatment of School Children, the Committee was authorized to issue the scheme when completed without further reference to the Council.

The remainder of the Report was approved.

PUBLIC HEALTH COMMITTEE.

Mr. DOMVILLE presented the Report of the Public Health Committee of April 12th, 1910.

The Public Health Officers Bill of the Association was approved, subject to any necessary alterations

suggested by Counsel, and the Chairman of the Public Health Committee was authorized to make arrangements necessary for the introduction of the Bill into Parliament.

The Public Health Officers Superannuation Bill of the Association was approved, subject to alterations advised by Counsel, and the Chairman of the Public Health Committee was authorized to make necessary arrangements for the introduction of the Bill into Parliament.

The Chairman of the Public Health Committee (Mr. Domville), Mr. Garstang, and Mr. Herbert Jones were appointed to represent the Association at the forthcoming Congress at the Royal Sanitary Institute to be held at Brighton in September.

Dr. Goyder was appointed to represent the Association at the Congress of the Royal Institute of Public Health to be held at Birkenhead in July.

The Council is of opinion that the enactment of the Quinquennial Enumeration of the population is essential to the promotion of the Public Health.

With reference to the need for a more frequent Enumeration of the population of the Country than that at present in vogue, a communication is to be forwarded to the principal Members of the Government in similar terms to the communication forwarded to the Government by the Society of Medical Officers of Health.

The remainder of the Report was approved.

HOSPITALS COMMITTEE.

Mr. HUGH KER presented the Report of the Hospitals Committee of April 7th, 1910.

Dr. Donald J. Mackintosh, M.V.O. (Medical Superintendent of the Western Infirmary, Glasgow), was recommended to the Committee of the Bolton Infirmary and Dispensary as an expert eminently qualified to undertake the inquiry which that body desires to have made.

The remainder of the Report was approved.

SCOTTISH COMMITTEE.

Dr. MUNRO MOIR presented the Report of the Scottish Committee, which was approved.

IRISH COMMITTEE.

Dr. CECIL SHAW presented the Report of the Irish Committee, which was approved.

SPECIAL POOR LAW COMMITTEE.

Dr. MACDONALD presented the Report of the Special Poor Law Committee of February 18th, March 4th and 18th, and April 1st and 13th, 1910.

The Committee was authorized to employ, at an expense not exceeding £100, a Special Commissioner to visit those Countries (especially Belgium, France, and Germany) in which systems of State Invalidity Insurance are in operation, to investigate the conditions of employment of Medical Practitioners in connexion therewith.

The Special Poor Law Reform Committee was authorized to prepare and issue to the Divisions, if found desirable, a Second Interim Report on its work.

The remainder of the Report was approved.

TERRITORIAL COMMITTEE.

Colonel ANDREW CLARK presented the Report of the Territorial Committee of March 4th, 1910, which was approved.

SPECIAL REPRESENTATIVE MEETING.

In the event of a Special Representative Meeting being convened before the Annual Meeting, the following Notice of Motion by the Cardiff Division, published in the BRITISH MEDICAL JOURNAL of April 9th, 1910, will be included in the Agenda.

Notice of Motion.

PROPOSED AMENDMENT OF BY-LAWS.

Election of Council.

That By-law 23 be amended by the inclusion of a new Sub-clause as follows, to be Sub-clause (*d*), the present Sub-clause (*d*) being made Sub-clause (*e*):

(*d*) 4 by the Representative Meeting, which shall have power to elect such Members at such time and in such manner as the Meeting may decide, provided that the term of office of each Member so elected shall expire at the close of the Annual Representative Meeting next following the date of his election.

CANDIDATES ELECTED TO THE ASSOCIATION.

The twelve Candidates whose names appeared on the Notice convening the Meeting were duly elected Members of the British Medical Association.

SOCIETIES' APPLICATIONS.

Permission to hold Meetings during the Annual Meeting of the British Medical Association was granted to the following: National Temperance League; Poor Law Medical Officers' Association; Irish Medical Graduates' Association; Society of Members of the Royal College of Surgeons of England; the Medical Library Association and the Association of Medical Officers of Health.

APPOINTMENT OF SOLICITOR TO THE ASSOCIATION.

Mr. W. E. Hempson was reappointed Solicitor to the Association for the ensuing twelve months.

REPORT OF COUNCIL.

The Report of Council as amended was approved, and ordered to be circulated in accordance with By-law 35.

Association Notices.

SPECIAL REPRESENTATIVE MEETING.

PRELIMINARY ANNOUNCEMENT.

A Special Representative Meeting will be held on Tuesday, June 28th, 1910, at 3 p.m., and the following day, if necessary, for the consideration of proposals submitted by the Council as the result of a communication received from the Privy Council with respect to the application of the Association for a Royal Charter. An Extraordinary General Meeting will be held on Wednesday, June 29th, for the confirmation of the decisions of the Representative Meeting. The Agenda of both Meetings will be issued at an early date.

BY ORDER OF THE COUNCIL,

GUY ELLISTON,
Financial Secretary and Business Manager.

J. SMITH WHITAKER,
Medical Secretary.

May 11th, 1910.

BRANCH AND DIVISION MEETINGS TO BE HELD

BATH AND BRISTOL BRANCH: BRISTOL DIVISION.—The annual meeting of this Division will be held at University College, Bristol, in the Medical Library, at 5.30 p.m., on Monday, May 23rd. Business: Election of officers and other business.—NEWMAN NEILD, Honorary Secretary.

GLASGOW AND WEST OF SCOTLAND BRANCH.—The annual meeting of the Branch will be held on Friday, May 27th, at 8.30 p.m., in Grosvenor Restaurant, Gordon Street, Glasgow.—WM. D. MACFARLANE, Junr., Honorary Secretary.

GLASGOW AND WEST OF SCOTLAND BRANCH: GLASGOW EASTERN DIVISION.—The annual meeting of this Division will be held in the Glasgow District Mental Hospital, Woodilee, Lenzie, on Wednesday, May 25th, at 4 p.m. Dr. Hamilton C. Marr and the Assistant Medical Officers of Woodilee will give: (1) A Lantern and Microscopical Demonstration on the Neurone; (2) A Clinical Demonstration, with special reference to cases of General Paralysis of the Insane, the differentiation of cases simulating this affection, and the advantages of treatment by Arsenical Preparations in such cases. Agenda of Business: (1) Minutes of last meeting. (2) Election of Office-bearers for 1910–11. (3) Notices of Motion for Annual Representative Meeting (see SUPPLEMENT, BRITISH MEDICAL JOURNAL, April 23rd,

1910). (4) Alteration of Article of Association viii. It is recommended by the Executive Committee that the first six lines be deleted and the following substituted: "Any member whose subscription shall not have been paid on or before June 30th of the current year shall receive a second notice requesting payment, and if the subscription is still unpaid by September 30th, he shall, without prejudice to his liability to the Association, be suspended from all privileges of membership; and at the end of the year, if the arrears be still unpaid, he shall, *ipso facto*, cease to be a member." (5) Any other competent business.—WILLIAM BRYCE, 30, Armadale Street, Dennistoun, Glasgow, Honorary Secretary.

METROPOLITAN COUNTIES BRANCH.—The annual meeting of the Branch will be held on Thursday, June 23rd, at 4.30 p.m., at 429, Strand, W.C. Agenda: (*a*) To receive the report of the election of new officers. (*b*) To receive the annual report of the Council of the Branch and the annual financial statement. (*c*) To receive the annual report of the Representatives of the Branch on the Central Council. (*d*) To make new rules or alter or repeal existing rules. (*e*) Any other business. (*f*) President's Address. Nominations for the offices of President-elect, four Vice-Presidents, Honorary Treasurer, and two Honorary Secretaries must be sent to Dr. Goodall, Eastern Hospital, Homerton, N.E., not later than May 28th. Nominations may be made by a Division or by twelve members of the Branch, and must be in writing and signed by the Honorary Secretary of the Division or by the twelve members.—E. W. GOODALL, W. GRIFFITH, Honorary Secretaries.

METROPOLITAN COUNTIES BRANCH: NORWOOD DIVISION.—The general meeting and annual dinner will be held on May 26th, at 7 p.m., at Queen's Hotel, Upper Norwood, Dr. T. D. Greenlees in the chair.—J. A. HOWARD, Honorary Secretary, Upper Norwood.

METROPOLITAN COUNTIES BRANCH: WESTMINSTER DIVISION.—A meeting of this Division will be held at the Criterion Restaurant, Piccadilly Circus, W., on Thursday, May 23rd. Dinner at 7.30 p.m. Meeting, 8.30 p.m., *re* medical treatment of London County Council school children in area of the Westminster Division (Boroughs of Westminster and Holborn) found defective on medical inspection. Addresses by Sir Victor Horsley, Dr. Archer, and others. Members of the medical profession in the area of the two boroughs are cordially invited to attend.—J. HOWELL EVANS, Honorary Secretary.

NORTH LANCASHIRE AND SOUTH WESTMORLAND BRANCH: FURNESS DIVISION.—The annual meeting will be held on Friday, May 27th, at 3.15 p.m., in the Masonic Club, Barrow. Business: (1) Annual report. (2) Election of office-bearers. (3) Dr. Pooley will propose this resolution: "In all cases in which a partner, after introduction or otherwise, sells his practice to a successor, all clubs shall be taken over by the successor at 4s. 4d. per head per annum; and all members of this Division agree not to take any such clubs within twelve months of transference." (4) The following resolution, submitted by the Chelsea Division: "That this meeting recognizes the necessity for a Union of Medical Practitioners with Parliamentary Representation, and requests the Executive of the British Medical Association to ascertain the wishes of members in the United Kingdom by referendum at the earliest possible date." (5) Dr. Williams: Case of Locomotor Ataxy. (6) Dr. Harper will open a discussion on the Use and Abuse of Midwifery Forceps. (7) Dr. J. A. Reed: Notes of a Case of Inversion of the Uterus. Any other business. As the Committee is anxious to make this chiefly a clinical meeting, will all members who can show cases or specimens kindly communicate with the Secretary?—JOHN LIVINGSTON, Honorary Secretary.

SOUTH-EASTERN BRANCH: FOLKESTONE DIVISION.—The annual meeting of the Folkestone Division and of the Folkestone, Ashford, and Dover Constituency will be held at the Hotel Wampach, Castle Hill Avenue, Folkestone, on Wednesday, May 25th, at 8.30 p.m. Agenda: (1) To elect officers, the Representative of the Division on the Branch Council, and the members of the Executive Committee. (2) To elect the Representative of the constituency in the Representative Meeting of the Association. (3) To receive the annual report of the Executive Committee. (4) To consider any business of the Annual Representative Meeting. (5) To transact any business that may be transacted at an ordinary meeting. (6) To alter the by-law relating to the date for holding the annual meeting. (7) Dr. Menzies will open a discussion on the Medical Inspection of School Children. All members of the South-Eastern Branch are invited to attend and introduce professional friends.—P. VERNON DODD, M.D., Folkestone, Honorary Secretary.

SOUTH MIDLAND BRANCH: BEDFORD AND HERTS DIVISION.—The annual meeting of the Division will be held at Whitehill, Luton, by kind permission of Mr. H. Durler, on Tuesday, May 24th, at 3 p.m., Dr. J. W. Bone in the chair. Agenda: Confirmation of minutes of last meeting; election of officers for ensuing year; any other business that may arise. A paper will be read by Dr. Nestor Tirard, Senior Physician, King's College Hospital, on Some Forms of Diarrhoea. The Chairman invites members of the Division to lunch, at 1.30, at Whitehill, Luton. There will be a meeting of the Executive Committee at 2.45.—G. H. GOLDSMITH, Honorary Secretary, Harpur Place, Bedford

SOUTH WALES AND MONMOUTHSHIRE BRANCH: MONMOUTHSHIRE DIVISION.—The annual meeting of this Division will be held in the Newport and Monmouthshire Hospital on Friday, May 27th, at 3.15 p.m.—R. J. COULTER, W. BASSET, Honorary Secretaries.

ROYAL ARMY MEDICAL CORPS.
EXCHANGE.

FIELD OFFICER, who has been home one year, wishes to exchange to India.—Address Exile, care of Messrs. Holt and Co., 3, Whitehall Place, London.

Vacancies and Appointments.

VACANCIES.

BIRMINGHAM AND MIDLAND HOSPITAL FOR SKIN AND URINARY DISEASES.—Clinical Assistant. Honorarium at the rate of 52 guineas per annum.

BOMBAY MUNICIPALITY.—Analyst and Bacteriologist. Salary, Rs.600 per mensem, plus half fees recovered for private analyses.

BRISTOL EYE HOSPITAL.—House-Surgeon. Salary, £80 per annum.

BRISTOL ROYAL INFIRMARY.—Honorary Medical Registrar.

BURY INFIRMARY.—Junior House-Surgeon. Salary, £80 per annum, rising to £90.

BUXTON: WYE HOUSE ASYLUM.—Male Assistant Medical Officer. Salary at the rate of £120 per annum.

CANTERBURY: KENT AND CANTERBURY HOSPITAL.—(1) Honorary Surgeon; (2) House-Surgeon. Salary, £80 per annum.

ESSEX EDUCATION COMMITTEE, CHELMSFORD.—School Medical Officer. Salary, £350 per annum, rising to £450.

FOLKESTONE: VICTORIA HOSPITAL.—House-Surgeon. Salary, £100 per annum.

GUILDFORD: ROYAL SURREY COUNTY HOSPITAL.—Assistant House-Surgeon. Salary, £50 per annum.

HEMEL HEMPSTEAD: WEST HERTS HOSPITAL.—House-Surgeon. Salary, £100 per annum.

HOSPITAL FOR SICK CHILDREN, Great Ormond Street, W.C.—Assistant Casualty Medical Officer. Salary, £30 for six months, and £2 10s. washing allowance.

JERSEY GENERAL DISPENSARY AND INFIRMARY.—Resident Medical Officer. Salary, £100 per annum.

LEEDS INFECTIOUS DISEASES HOSPITALS AND SANATORIUM.—Two Resident Medical Officers. Salary at the rate of £110 per annum.

LIVERPOOL DISPENSARIES.—Assistant Surgeon. Salary, £100 per annum.

LONDON COUNTY COUNCIL.—Woman Inspector under the Midwives Act. Salary, £250 per annum, rising to £350.

LONDON THROAT HOSPITAL, Great Portland Street, W.—House-Surgeon, non-resident. Honorarium, £50 per annum.

MANCHESTER: COUNTY ASYLUM, Prestwich.—(1) Junior Assistant Medical Officer. Salary, £150 per annum, increasing to £250. (2) Locum tenens. Salary, £4 4s. per week.

MANCHESTER: ST. MARY'S HOSPITALS FOR WOMEN AND CHILDREN.—House-Surgeon. Honorarium at the rate of £50 per annum.

MANCHESTER TOWNSHIP.—Junior Resident Assistant Medical Officer at the Workhouse, Crumpsall. Salary, £110 per annum.

MOUNT VERNON HOSPITAL FOR CONSUMPTION AND DISEASES OF THE CHEST, Northwood.—House-Physician. Salary, £75 per annum.

MOUNT VERNON HOSPITAL FOR CONSUMPTION AND DISEASES OF THE CHEST.—Clinical Assistants for the Hospital at Hampstead and Out-patient Department, Fitzroy Square.

NATIONAL ASSOCIATION FOR THE ESTABLISHMENT AND MAINTENANCE OF SANATORIA FOR WORKERS SUFFERING FROM TUBERCULOSIS.—Assistant Medical Officer for the Benenden Sanatorium. Salary, £80 per annum.

NATIONAL HOSPITAL FOR THE PARALYSED AND EPILEPTIC, Queen Square, W.C.—Senior House-Physician. Salary, £50 per annum.

NEW ZEALAND: WHANGAREI HOSPITAL.—Medical Superintendent. Salary, £450 per annum.

NOTTINGHAM GENERAL HOSPITAL.—Assistant House-Surgeon. Salary, £60 per annum.

QUEEN'S HOSPITAL FOR CHILDREN, Hackney Road, E.—(1) House-Physician. (2) Two House-Surgeons. Salary at the rate of £60 per annum each.

REDHILL: EARLSWOOD ASYLUM.—Junior Assistant Medical Officer. Salary, £130 per annum, rising to £150.

RYDE: ROYAL ISLE OF WIGHT COUNTY HOSPITAL.—Resident House-Surgeon (Male). Salary, £125 per annum.

ST. MARK'S HOSPITAL FOR CANCER, FISTULA, ETC., City Road, E.C.—House-Surgeon. Salary, £80 per annum.

SCARBOROUGH HOSPITAL AND DISPENSARY.—Junior House-Surgeon. Salary at the rate of £80 per annum.

SEAMEN'S HOSPITAL SOCIETY: ALBERT DOCK HOSPITAL, E.—(1) Senior House-Surgeon. Salary at the rate of £75 per annum, and additional £25 for acting as Registrar. (2) House-Surgeon. Salary at the rate of £50 per annum.

SHEFFIELD ROYAL HOSPITAL.—Assistant House-Physician. Salary, £50.

STAFFORD: STAFFORDSHIRE GENERAL INFIRMARY.—House-Surgeon. Salary, £100 per annum.

STOCKPORT INFIRMARY.—Junior House-Surgeon (male). Salary, £80 per annum.

WEST END HOSPITAL FOR DISEASES OF THE NERVOUS SYSTEM, PARALYSIS, AND EPILEPSY, Welbeck Street, W.—Out-patients' Physician.

WEST LONDON HOSPITAL, Hammersmith Road, W.—House-Physician for six months.

WESTMORLAND CONSUMPTION SANATORIUM.—Assistant Resident Physician. Salary, £100 per annum.

BIRTHS, MARRIAGES, AND DEATHS.

The charge for inserting announcements of Births, Marriages, and Deaths is 3s. 6d., which sum should be forwarded in post-office orders or stamps with the notice not later than Wednesday morning, in order to ensure insertion in the current issue.

DEATH.

BABER.—On May 14th, at 62, Brook Street, W., Edward Cresswell Baber, M.B.Lond., aged 59. Friends kindly accept this intimation.

DIARY FOR THE WEEK.

MONDAY.

KING'S COLLEGE: Physiological Laboratory, 4.30 p.m.—Lecture by Professor F. W. Mott, F.R.S.: The Relationship of the Brain to Voice.

ROYAL SOCIETY OF MEDICINE:

Special meeting, Morley Hall, George Street, Hanover Square, W., 5 p.m.—Discussion on Vaccine Therapy: Its Administration, Value, and Limitations; to be opened by Sir Almroth Wright, F.R.S.

ODONTOLOGICAL SECTION, 15, Cavendish Square, W., 8 p.m.—Paper:—Mr. Douglas E. Caush: The Spindles of von Ebner (illustrated by lantern slides). Casual communications:—Mr. Arthur S. Underwood: Some Egyptian Skulls. Mr. G. Thomson: A Case showing the Result of Extraction of the Six-year-old Molars.

TUESDAY.

MEDICO-LEGAL SOCIETY, 11, Chandos Street, W., 8.15 p.m.—Paper:—The Policy of the English Poor Law and Its Proposed Medical Reform, by Dr. Major Greenwood.

ROYAL SOCIETY OF MEDICINE:

MEDICAL SECTION, 15, Cavendish Square, W., 5.30 p.m.—Annual meeting and election of officers.

WEDNESDAY.

ROYAL SOCIETY OF MEDICINE:

Special meeting, Morley Hall, George Street, Hanover Square, W., 5 p.m.—Resumption of discussion on Vaccine Therapy: Its Administration, Value, and Limitations, by Dr. Hale White and others.

THURSDAY.

ROYAL SOCIETY OF MEDICINE:

OBSTETRICAL AND GYNAECOLOGICAL SECTION, 15, Cavendish Square, W., 7.45 p.m.—(1) Annual meeting and election of officers. (2) Papers:—Dr. F. J. McCann: Caesarean Section in the Treatment of Eclampsia Gravidarum. Dr. A. J. Wallace: Contribution to the Life-history of Fibromyomata of the Uterus.

FRIDAY.

ROYAL SOCIETY OF MEDICINE:

SECTION OF DISEASE IN CHILDREN, 11, Chandos Street, W., 4.30 p.m.—Cases and specimens.

SECTION OF ANAESTHETICS, 15, Cavendish Square, W., 6 p.m.—Annual meeting and election of officers.

EPIDEMIOLOGICAL SECTION, 15, Cavendish Square, W., 8.30 p.m.—Papers and discussion.

SATURDAY.

ROYAL SOCIETY OF MEDICINE:

SECTION OF BALNEOLOGY AND CLIMATOLOGY, Buxton.—Annual meeting for election of officers and visits to the Devonshire Hospital and Baths.

POST-GRADUATE COURSES AND LECTURES.

CENTRAL LONDON THROAT AND EAR HOSPITAL, Gray's Inn Road, W.C.—Lectures, Tuesday and Friday, 3.45 p.m., External and Middle Ear.

HOSPITAL FOR CONSUMPTION AND DISEASES OF THE CHEST, Brompton, S.W.—Wednesday, 4 p.m., Inflammatory Lesions in the Neighbourhood of the Diaphragm.

HOSPITAL FOR SICK CHILDREN, Great Ormond Street, W.C.—Thursday, 4 p.m., Demonstration of Selected Surgical Cases in the Ward.

LONDON SCHOOL OF CLINICAL MEDICINE, Seamen's Hospital, Greenwich.—Daily arrangements: Out-patient Demonstration, 10 a.m.; Medical and Surgical Clinics, 2.15 p.m. and 3.15 p.m. respectively; Operations, 2 p.m. Special Clinics: Ear and Throat, at noon and 4 p.m., Monday, and noon, Thursday; Skin, at noon and 4 p.m., Thursday, and noon, Friday; Eye, 11 a.m., Wednesday and Saturday; Radiography, 4 p.m., Thursday. Special Lectures: Tuesday, 5.15 p.m., Cancer of the Intestines Friday, 2.15 p.m., Chronic Peritonitis.

NATIONAL HOSPITAL FOR THE PARALYSED AND EPILEPTIC, Queen Square, W.C.—Tuesday, 3.30 p.m., Clinical Lecture. Friday, 3.30 p.m., Optic Neuritis.

NORTH-EAST LONDON POST-GRADUATE COLLEGE, Prince of Wales's General Hospital, Tottenham, N.—Monday, Clinics, 2.30 p.m., Medical Out-patient: Nose, Throat and Ear. Tuesday, 10 a.m., Medical Out-patient Clinic; 2.30 p.m., Operations; Clinics: Surgical, Gynaecological; 3.30 p.m., Medical In-patient; 4.30 p.m., Demonstration of Selected Medical Cases. Wednesday, 2.30 p.m., Medical Out-patient, Skin and Eye Clinics; *X* Rays; 4.30 p.m., Special Demonstration of Selected Eye Cases. Thursday, 2.30 p.m., Gynaecological Operations; Clinics: Medical Out-patient; Surgical Out-patient; 3 p.m., Medical In-patient; 4.30 p.m., Lecture; Surgical Diseases of the Pancreas. Friday, 2.30 p.m., Operations; Clinics: Medical Out-patient, Eye; 3 p.m., Medical In-patient.

WEST LONDON POST-GRADUATE COLLEGE, Hammersmith Road, W.—Daily arrangements: Medical and Surgical Clinics, 2 p.m.; Operations, 2 p.m.; *X* Rays, 2 p.m. Tuesday: Gynaecology, 10 a.m.; Throat, Nose, and Ear, 2 p.m.; Skin, 2 p.m. Wednesday: Diseases of Children, 10 a.m.; Throat, Nose, and Ear Operations, 10 a.m.; Practical Medicine, 12.15 p.m.; Eye, 2 p.m.; Gynaecology, 2 p.m. Thursday, Surgical Registrar, 10 a.m.; Eye, 2 p.m.; Orthopaedics, 2 p.m. Friday: Medical Registrar, 10 a.m.; Gynaecology, 10 a.m.; Throat, Nose, and Ear, 2 p.m.: Skin, 2 p.m. Saturday: Diseases of Children, 10 a.m.; Eye, 10 a.m. Lectures, at 5 p.m.: Monday, Operations for Appendicitis; Tuesday, Insects as Carriers of Disease in Tropical Medicine; Wednesday, What can be Learnt from a Blood Examination; Thursday, Practical Surgery; Friday, Clinical Pathology.

CALENDAR OF THE ASSOCIATION.

Date.	Meetings to be Held.
MAY.	
23 MONDAY	BRISTOL DIVISION, *Bath and Bristol Branch*, Annual Meeting, Medical Library, University College, Bristol, 5.30 p.m. WESTMINSTER DIVISION, *Metropolitan Counties Branch*, Criterion Restaurant, Dinner, 7.30, Meeting, 8.30 p.m.
24 TUESDAY	BEDFORD AND HERTS DIVISION, *South Midland Branch*, Whitehill, Luton, 3 p.m.; Lunch, 1.30 p.m.; Executive Committee, 2.45 p.m.
25 WEDNESDAY	BATH AND BRISTOL BRANCH, Bath. CARDIFF DIVISION, *South Wales and Monmouthshire Branch*, Cardiff. GLASGOW EASTERN DIVISION, *Glasgow and West of Scotland Branch*, Glasgow District Mental Hospital, 4 p.m. FOLKESTONE DIVISION, *South-Eastern Branch*, Annual Meeting of Division, and Folkestone, Ashford, and Dover Constituency, Hotel Wampach, Folkestone, 8.30 p.m. RICHMOND DIVISION, *Metropolitan Counties Branch*. Annual Meeting, Royal Hospital Richmond, 8.30 p.m.
MAY *(continued).*	
26 THURSDAY	NORWOOD DIVISION, *Metropolitan Counties Branch*, General Meeting and Annual Dinner. Queen's Hotel, Upper Norwood, 7 p.m.
27 FRIDAY	LONDON: Conference between Special Poor Law Reform Committee and Contract Practice Subcommittee, 2 p.m. CITY DIVISION, *Metropolitan Counties Branch*, Annual Meeting, Hackney Town Hall, 4 p.m. FURNESS DIVISION, *North Lancashire and South Westmorland Branch*, Annual Meeting, Masonic Club, Barrow, 3.15 p.m. GLASGOW AND WEST OF SCOTLAND BRANCH, Annual Meeting, Grosvenor Restaurant, Gordon Street, Glasgow, 8.30 p.m. HAMPSTEAD DIVISION, *Metropolitan Counties Branch*, 4.30 p.m. MONMOUTHSHIRE DIVISION, *South Wales and Monmouthshire Branch*, Newport and Monmouthshire Hospital, 3.15. TOTTENHAM DIVISION, *Metropolitan Counties Branch*, Annual Meeting, Tottenham Hospital, 4.30 p.m.

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